

# DAYTON MEDICINE

*The Journal of the Montgomery County Medical Society*

Volume 54, Number 1

February 1998



provide for the health care needs of the uninsured and underinsured in our county.

And perhaps you are not aware of one most significant event that got its start in our medical community. This event continues to reverberate across our land much to the chagrin of the tobacco companies and, conversely, to the benefit of the populace as a whole. The controversy over tobacco company advertising was initiated by our own Dr. Konrad Kircher when he condemned this advertising and the effects of smoking in the form of a resolution submitted to the OSMa House of Delegates in 1985. His resolution, which was approved by the OSMa and later by the AMA House of Delegates, was the spark that brought national recognition to the AMA when it came out against smoking and tobacco company advertising. I am proud to have witnessed that event brought about by a physician in our community who has been a part of organized medicine for as long as I can remember.

All this demonstrates that there is no limit to what this medical society can accomplish for the good of your patients when it puts its collective heart and mind to any project.

This leads me to one last thought in this, my one and only sermon.

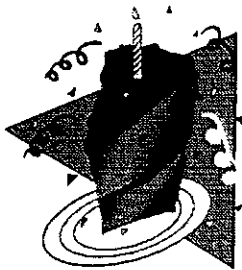
In addition to the financial resources necessary to undertake the projects and implement the programs this Board will approve in the future, the most important asset you can acquire is that of personnel resources. You well know that people make this world go round and that the success of any project is determined by the people factor

surrounding it. I am sure that we have those people amongst us that will be needed in the future to lead this Society. I know that we are blessed with diverse talents that should be identified, sought out and cultivated. I suggest to you that this be a continuing process and that you, as leaders representing your medical society, give this priority in whatever capacity you serve. I also know that this is easier said than done but should you be successful, you will have harnessed an asset that, coupled with the financial resources already mentioned, will position this medical society for any situation that could confront it.

I understand the confusion that was caused two years ago at the

inaugural meeting when I was called to the podium to be honored for twenty-five years of service. I know that some of you took that presentation to indicate my impending retirement. On one occasion after that night, I was asked by a member why I was still showing up for work! Interestingly enough, I had considered retirement to occur six months later only to be asked to stay on for one more year, and then again asked to remain for an additional year.

Now it is time to leave. I have performed on the mission as presented to me and I depart with a sense of gratitude for the opportunity to serve and for the trust and confidence shown to me along the way. Thank you again. **DM**



## Happy 100th Birthday Visiting Nurses Association!



Home Health Care

Wound Care

Speech Therapy

Skilled Nursing Care

Enterostomal Therapy

Mobile Meals

Physical Therapy

Social Services

Disease Management

Occupational Therapy

Nutrition Consultation

Health Watch

For Information and Referrals Call:

**225-4500**

VNA is a partnership with the Combined Health District  
and a United Way Member Agency

## Developing Dayton's Public Health System

by *Clare M. Balawajder and John Sanford*

Public health medicine in Dayton began in 1867 when the City Council passed an ordinance establishing a Board of Health. The unpaid, five member Board was responsible for inspecting homes and businesses, following up reports of food contamination, and making all rules and regulations "...necessary and proper for the public health." Inspectors were appointed to make investigations and to "...send the diseased, if advisable, to the pest house or hospital." The early sanitary regulations, which were always subject to the political approval of the City Council, required inspections only after an outbreak or violation. Violations and subsequent epidemics were frequent. Manure from cows, horses and pigs encouraged flies in summer, and contaminated drinking water drawn from the city's numerous wells. Typhoid and diphtheria outbreaks were common, and tuberculosis was known as the "Captain of the Hosts of Death." Positive measures included small-pox vaccination, required from 1867, and the first collecting of detailed statistics of birth and death.

In the midst of these conditions, a century ago this year, a private charity called the Fruit and Flower Mission was chartered to provide home nursing services. Hundreds of chrysanthemum bou-

quets were distributed during twice weekly visits to Dayton's homebound poor. In May 1911, the Mission organized Dayton's first well baby clinic. In 1913, the Fruit and Flower Mission renamed itself the Visiting Nurses Association in recognition of the growing professionalism of its nurses, and their ability to provide more than just fruit and flowers. The new VNA extended nursing care to all of Dayton's sick population regardless of race and status. Maternity classes and milk stations were established in subsequent years. Wealthy benefactors funded the establishment of a "Fresh Air Farm" in Bellbrook, so that children could escape the city's air pollution.

By far the most important step in the creation of a dynamic Department of Health was Dayton's switch to a City Manager Plan of government in 1914. This progressive transformation was intended to isolate the daily running of the City's business from the political micro-management of the mayor and council. Most importantly perhaps, by 1916, the new city manager had reorganized the Division of Health under the City's Department of Public Welfare. With the new era, the City hired its first district physicians and an epidemiologist. The old Board of Health was reorganized to become

for the first time, a proactive agency, with the resources to conduct regular health inspections before the outbreak of disease.

In 1918, Dayton was divided into five health districts with one physician for each district, while a sixth physician operated a day clinic for venereal diseases. The city physicians worked part time and received an annual salary of \$500. Most maintained private practices as well. Dr. H. F. Patten, had his private office in room 201 of the Reibold Building in downtown Dayton. As a city physician, Dr. Patten is shown in the cover photo examining an infant at the Annual Baby Conference, May 1925, while unseen outside the door, a line of 100 moms and babies await their turn. Dayton's city physicians treated the poor, served Dayton's police and fire fighters, conducted public clinics, attended inmates of the city workhouse on Germantown Pike in west Dayton, and began an aggressive schedule of weekly visits to public and parochial schools. In 1920, city physicians examined 45,715 school children, finding 1400 cases of malnutrition, 2200 cases of enlarged glands, and 5105 cases of tonsils. Other more serious conditions were also identified.

*(Continued on Page 22)*

(Continued From Page 21)

In 1914, the Visiting Nurses Association entered into an agreement combining public services under the auspices of the Division of Health. This pioneering arrangement strengthened the resources of both agencies and became a model for other cities across the nation. The new Division of Health grew swiftly to employ seven physicians and ten professional nurses concerned with all aspects of public health. At the same time the Visiting Nurses charity funded an additional 10 nurses administered through the Division of Health. By 1925, the city nurses were making more than 18,000 home calls a year, and reaching 9,436 persons with health maintenance information.

Gradually, Dayton began to take advantage of new knowledge about the epidemiology of disease and the practical promotion of public health. New ordinances were passed to regulate the city's milk supply, including a ban on livestock in the city limits, and a requirement that all milk sold in Dayton be bottled and chilled with ice. Milk pasteurization was required in 1918. Other laws provided for preventive inspection of restaurants and food stores. Through the advice of national organizations like the Anti-tuberculosis Society, "promiscuous spitting" was banned on street cars. Water and meat supplies were regularly inspected for the first time.

As a result of these efforts, infant mortality per thousand live births fell from 124 in 1913, to 51.3 in 1925. By way of comparison, for all of Montgomery County, the 1996 rate of infant mortality was

9.2. Improved sanitation, a new sewer system, and more effective treatments reduced Dayton's diphtheria deaths per 100,000 population from 84 in 1913, to 3 in 1925. Death from typhoid fever was likewise reduced from 18.4 per 100,000 in 1912 (the year it claimed the life of Dayton's Wilbur Wright), to less than two mortalities in 1925. Other statistics were equally impressive. Of 40 major American cities in 1925, Dayton's death rate per 1,000 people was 12.0, placing Dayton 37th in the rankings.

In 1969, Dayton's pioneering Division of Health merged with the Montgomery County Health District to form the Combined Health District of Montgomery County. Dr. Robert A. Vogel was appointed as the first Health Commissioner for the Combined Health District, which continues to perform the duties of the Division of Health, while responding to the changing epidemiology of disease and human health needs.

\*\*\*\*\*

The cover image is from the extensive archives of the Visiting nurses Association held by Special Collections and Archives at Wright State University's Fordham Health Sciences Library. Other sources of information in this article include the annual reports of the City of Dayton Division of Health which are also preserved in WSU's Special Collections Department. Special thanks to Bill Wharton of the Combined Health District.

Please call (937) 775-2092 for more information, or to make a tax-deductible donations of archival records, physician's personal papers, or other items of relevance to medical history. **DM**

## VNA Today

**One hundred years ago, Dayton's Visiting Nurses Association was a leader in creating the profession and practice of home health care. VNA today continues to be a leader. The agency is Medicare certified and is accredited with commendation by the Joint Commission for Accreditation of Health Care Organizations.**

**At 100 years old, the VNA looks to the future with state of the art care including disease management programs for Asthma, Diabetes and Congestive Heart Failure. Through their alliance with Home Care Ohio, a partnership with all the Visiting Nurses organizations in Ohio, they have relationships with a wide variety of managed care organizations.**

**At a time when the home health industry has come under scrutiny, this VNA, like others around the nation, has maintained an unblemished reputation. Through its partnership with the Combined Health District of Montgomery County, and by leveraging dollars from various sources like the Human Services Levy and the United Way, the VNA continues to bring compassionate care to patients and their families.**



### **On the Cover by Clare Balawajder and John Sanford**

**City Physician, Dr. H.F. Patten, examines an infant at the Annual Baby Conference, May, 1925. Unseen, outside the door, a line of 100 moms and babies await their turn.**

Public health medicine in Dayton began in 1867 when the City Council passed an ordinance establishing a Board of Health. The unpaid, five member Board was responsible for inspecting homes and businesses, following up reports of food contamination, and making all rules and regulations "...necessary and proper for the public health." Inspectors were appointed to make investigations and to "...send the diseased, if advisable, to the pest house or hospital." The early sanitary regulations, which were always subject to the political approval of the City Council, required inspections only after an outbreak or violation. Violations and subsequent epidemics were frequent. Manure from cows, horses and pigs encouraged flies in summer, and contaminated drinking water drawn from the city's numerous wells. Typhoid and diphtheria outbreaks were common, and tuberculosis was known as the "Captain of the Hosts of Death". Positive measures included smallpox vaccination, required from 1867, and the first collecting of detailed statistics of birth and death.

In the midst of these conditions, a private charity called the Fruit and Flower Mission was chartered in 1898 to provide home nursing services. Hundreds of chrysanthemum bouquets were distributed during twice weekly visits to Dayton's homebound poor. In May 1911, the Mission organized Dayton's first well baby clinic. In 1913, the Fruit and Flower Mission renamed itself the Visiting Nurses Association in recognition of the growing professionalism of its nurses, and their ability to provide more than just fruit and flowers. The new V.N.A. extended nursing care to all of Dayton's sick population regardless of race and status. Maternity classes and milk stations were established in subsequent years. Wealthy benefactors funded the establishment of a "Fresh Air Farm" in Bellbrook, so that children could escape the city's air pollution.

By far the most important step in the creation of a dynamic Department of Health was Dayton's switch to a City Manager Plan of government in 1914. This progressive transformation was intended to isolate the daily running of the City's business, from the political micro-management of the mayor and council. Most importantly perhaps, by 1916, the new city manager had reorganized the Division of Health under the City's Department of Public Welfare. With the new era the City hired its first district physicians and an epidemiologist. The old Board of Health was reorganized to become for the first time, a proactive agency, with the resources to conduct regular health inspections before the outbreak of disease.

In 1918, Dayton was divided into five health districts with one physician for each district, while a sixth physician operated a day clinic for venereal diseases. The city physicians worked part time and received an annual salary of \$500. Consequently they had private practices to attend to as well. Dr. Patten, shown at work on the cover photograph, maintained a private office in room 201 of the Reibold Building in downtown Dayton. Dayton's city physicians treated the poor, served Dayton's police and fire fighters, conducted public clinics, attended inmates of the city workhouse on Germantown Pike in west Dayton, and began an aggressive schedule of weekly

visits to public and parochial schools. In 1920, city physicians examined 45,715 school children finding 1400 cases of malnutrition, 2200 cases of enlarged glands, and 5105 cases of tonsils. Other more serious conditions were also identified.

In 1914, the Visiting Nurses Association entered into an agreement combining public services under the auspices of the Division of Health. This pioneering arrangement strengthened the resources of both agencies and became a model for other cities across the nation. The new Division of Health grew swiftly to employ seven physicians and ten professional nurses concerned with all aspects of public health. At the same time the Visiting Nurses charity funded an additional 10 nurses administered through the Division of Health. By 1925, the city nurses were making more than 18,000 home calls a year, and reaching a further 9,436 persons with health maintenance information.

Gradually, Dayton began to take advantage of new knowledge about the epidemiology of disease and the practical promotion of public health. New ordinances were passed to regulate the city's milk supply, including a ban on livestock in the city limits, and a requirement that all milk sold in the Dayton be bottled and chilled with ice. Milk pasteurization was required in 1918. Other laws provided for preventive inspection of restaurants and food stores. Through the advice of national organizations like the Anti-Tuberculosis Society, "promiscuous spitting" was banned on street cars. Water and meat supplies were regularly inspected for the first time.

As a result of these efforts, infant mortality per thousand live births fell from 124 in 1913, to 51.3 in 1925. At the same time, improved sanitation, a new sewer system, and more effective treatments reduced Dayton's diphtheria deaths per 100,000 population from 84 in 1913, to 3 in 1925. Death from typhoid fever was likewise reduced from 18.4 per 100,000 in 1912 (the year it claimed the life of Dayton's Wilbur Wright), to less than two mortalities in 1925. Other statistics were equally impressive. Of 40 major American cities, Dayton's death rate per 1000 people was 12.0, placing Dayton 37th in the rankings.

Today's Montgomery County Combined Health District is the direct descendent of Dayton's pioneering Division of Health. It was formed at the behest of Montgomery County Health Commissioner Dr. Vogel who ~~agreed to step aside, when, in 1969,~~ the Dayton Division of Health merged with the Montgomery County Health District.

*became the first Combined  
Health Commissioner when*

\*\*\*\*\*

The cover image is from the extensive archives of the Visiting Nurses Association held by Special Collections and Archives at Wright State University's Fordham Health Sciences Library. Other sources of information in this article included the annual reports of the City of Dayton Division of Health which are also preserved in Wright State University's Special Collections department.

Please call (937) 775-2092 for more information, or to make a tax deductible donation of archival records, physician's personal papers, or other items of relevance to medical history.