

National Hospital Week

May 6-12

In 1921, leaders in the health care field established a National Hospital Day to encourage public appreciation of the people working in hospitals. The day chosen was May 12, the birthday of hospital pioneer, Florence Nightingale. By 1953, the day was expanded to National Hospital Week, recognizing the tremendous growth in hospital services in this country.

The theme of National Hospital Week 1973, sponsored nationally by the American Hospital Association and celebrated by the nation's more than 7,000 hospitals in their local communities, is "Your Hospital...A Caring Community—Your Health...Our Common Concern."

With mounting public concern about the effectiveness of our health care system and the rising costs of health care, hospitals are being subjected to some sharp criticism and demands for change.

Voicing sympathy with the demands of the American public for improvements in the delivery and quality of health care, and

for containment of health care costs, the Association also suggests that National Hospital Week is an appropriate time to express appreciation to the more than 3 million people working in the nation's hospitals.

Not so long ago, the first hospitals were simple shelters where people went to die. Today, they are complex healing, educational and research institutions, where lives are saved, the causes and cure of disease sought, and future health professionals educated and trained.

Hospital employees represent an incredible diversity of skills and talents, working in some 200 different types of jobs. However, they have one goal in common: a working life dedicated to caring for the ill and injured.

Modern technology and rapid scientific advances have made possible saving of lives and prevention or curing of disease.

But the human hands and hearts are still essential to the healing arts.



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Hyperbaric Oxygen Effect On Brain Damage Studied

Hopes that the use of high pressure oxygen in hyperbaric chambers might successfully treat brain damage in such conditions as stroke and senility have been jolted by Duke researchers.

The researchers reported in Boston last week that elderly stroke victims and presenile patients so treated showed no more improvement in lucidity and functioning than control patients who were not treated.

Many studies of the effects of high pressure oxygen on brain function have been started around the country since 1969, when researchers in Buffalo reported "dramatic" improvements in 13 senile patients given OHP.

The treatment is based on the idea that the blood stream can be supersaturated with oxygen when a patient is under the high atmospheric pressures that can be achieved in a hyperbaric chamber.

It is generally believed that the decrease in oxygen to brain tissue in strokes and senility is the basis for the loss of function seen in these conditions.

Since the Buffalo report, tentative positive results have been reported from half a dozen projects.

"But such research studies are costly and difficult and time consuming and the methods used by many of these researchers have been subject to criticism," said Dr. Glen Davis, coordinator of the Duke study.

"Each piece of our study and testing was done by experts, and our testing was much more extensive in all areas of functioning than the other groups," he said. "We feel these very strongly negative results are important because the government and institutions are spending a lot of money on this."

Davis presented the findings at the annual meeting of the American Academy of Neurology in Boston. Davis, who is now a medical intern at Duke, was a fellow in the Center for the Study of Aging and Human Development at the time of the study.

The study format was the same as that used in Buffalo by Dr. Eleanor Jacobs and her associates at the State University of New York and the local VA hospital. Twenty patients received a series of

90-minute exposures to oxygen at 2½ atmospheres of pressure twice a day for 15 days. That is a simulated depth of 50 feet below sea level.

The control patients were taken to a depth of 10 feet breathing room air to simulate diving. Later in the study, each of the control patients was also treated with OHP after a control run so that treatment was not withheld from anyone.

Before and after the treatments, both groups were given an extensive six-hour battery of psychological tests, including memory, intelligence and motor performance scales.

The patients were also given electroencephalograms and cerebral blood flow tests and were rated on their functional ability before, during and after by doctors, nurses and their families. The nurses and the families were not told which patients had received OHP during the tests so that the evaluations were double blind.

"We found no differences in functioning between the groups of treated patients and the controls," Davis said. "None of the patients improved."

Unlike previous groups, the Duke researchers chose the patients for the experiment from specific disease groups—those with Alzheimer's disease or premature senility and those with brain damage due to vascular insufficiency. Other studies have used a varied mixture of senile and brain-damaged subjects.

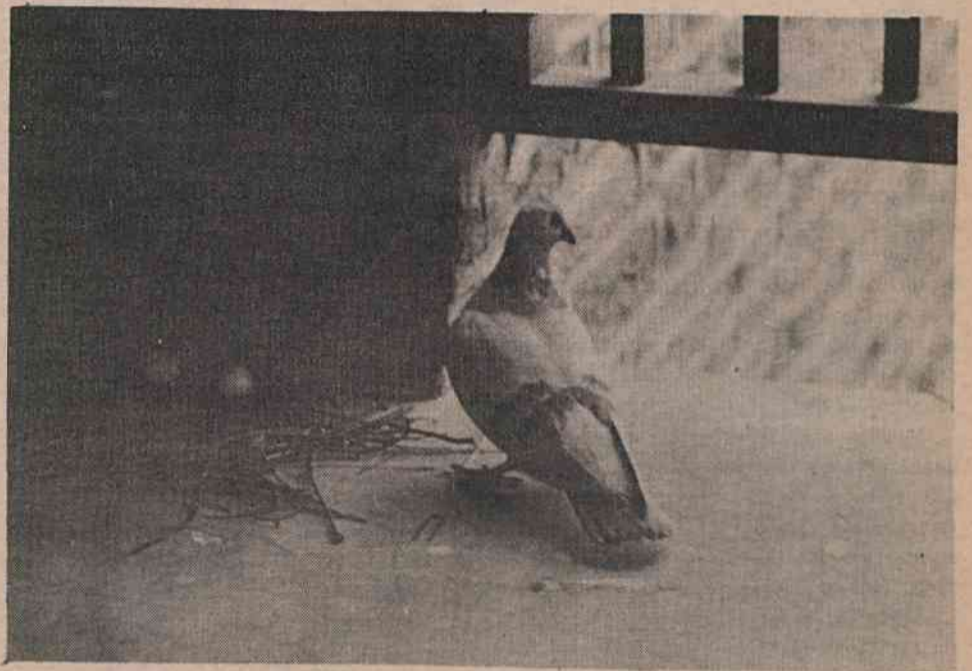
Davis said the theoretical basis for OHP treatment of these conditions is "tenuous indeed." Mental deterioration as a result of vascular disease might respond to an increased supply of oxygen if there still remained, months after the stroke, a significant amount of oxygen-deficient but living tissue.

He said the only basis for believing that a condition such as premature senility might respond to higher oxygen concentrations is the finding by some authors of decreased oxygen utilization in degenerative brain diseases.

"We don't really understand the etiology of senility or presenility," he said.

The principal investigators on the

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BUILDING CASTLES IN THE SKY—The season of spring is a time of rebirth and the Division of Medical Psychology has been reminded of this fact by two roosting pigeons who have built their castle of straw on a fourth floor terrace in CR II. According to Mrs. Anita Hume, secretary to Dr. Doyle Gentry who is head of the division, the mama pigeon recently layed two eggs and to ensure her complete privacy the division has put up a sign on the terrace door cautioning passers-by against any disturbance to the pigeons and their eggs. (Photo by Dale Moses)

Long-Term Employee Reflects On Hospital's Early Years

In 1928 a group of men converged on a wooded area in West Durham to begin making a reality out of the philanthropic dreams the Duke family had to establish a major private university and hospital in the Piedmont of North Carolina. They carried surveyor's equipment and within weeks had marked out the boundaries of West Campus.

In the course of the year, others followed to clear the land, pour foundations, haul in mountains of Hillsboro stone and stack the gray blocks into what was to become one of the nation's foremost educational institutions.

One of the men who arrived that first day and has worked ever since to build Duke University and its medical center was Earl W. Mangum. Mangum retired early this year as head of the elevator shop, but before he left, he shared with "Intercom" some of his memories and impressions of the early years.

"When I started working here it wasn't Duke, it was the Southern Power

Company," he said. "We built a heating plant over on the East Campus when they were renovating it. I worked with the engineers figuring out the elevations so that people who came after us would know how much dirt to cut out.

"Duke formed their own construction company in those days, because no other outfit in the area was large enough to tackle building this university. One of my first jobs was working with the surveyors cutting the stobbs that they wrote the elevations on," he said.

"Right where the Baker House is now was an old school house called the Rocky Knolls School," Mangum recalled. "We used it for our office. The land used to belong to the Rigsbees, and they sold it to the Dukes so the university could be built on it. Originally, it was going to be over in back of the East Campus, but the land was too expensive there because it had buildings on it, and so they came over here.

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