Opinions

"Things That Matter"

by Lucien Coleman

Well, it's time for the annual pursuit of the "true meaning of Christmas" to begin. Between renditions of "Jingle Bells" and "Rudolph the Red-Nosed Reindeer," disc jockeys will remind us to be on the lookout for this elusive "true meaning." A multitude of sermons will be preached about it, and TV personalities will put on their sincerest looks and pour sentimental syrup about the true meaning of Christmas all over the tube.

We will be reminded that the "spirit of Christmas" is reflected in silver bells, the glow of candlelight, chestnuts roasting on an open fire, ribbon-bedecked packages, holly and mistletoe, and aroma of bayberries, sleigh rides, midnight masses, and groups of carolers tramping through the snow. But many of these images turn out to be romantic illusions, obscured by harsher realities of the season—winter fuel bills, harried salespersons, clogged streets, and the annual highway carnage wrought by driving drunks.

by driving drunks.

Maybe I'm just getting older.

Maybe my memory is playing tricks. But it seems to me that there used to be something really special about Christmas, a certain magic that made "joy" something more than a word on greeting cards. It was more a feeling than a tangible reality. But the feeling was real, down deep inside.

Christmas is a complex phenomenon. I'm not sure anyone can explain its meaning fully. But I think I have a clue. Whatever else Christmas means, it has something to do with giving.

I'm not talking about exchanging" gifts. I dislike that terminology. It suggests that we give something only to those who will give to us in return. "Exchanging" presents confuses giving with setting.

with getting.

Last year, Christmas Eve fell on one of our regular garbage collection days. I had often thought about those guys who came by before daylight twice a week, doing a hard, dirty, thankless job in all kinds of weather. On Christmas Eve, I got up two hours earlier than usual and waited until I heard the familiar sound of the garbage truck. Then I went out into the frigid morning air and handed each of the men a five-dollar bill, along with a personal word of thanks.

It wasn't much money, by today's standards. But I think those small gifts meant a lot to those fellows. And I know it meant a lot to me.

This year, I plan to carry out this experiment on a broader scale. I have blind friends who would love to go out to dinner, and who could use my eyes on a shopping trip. I know elderly people who would like nothing better than to have a long conversation with someone from outside their nursing home. And there are young couples, students, who would find so much freedom in an evening out, while someone else cares for their children.

I hope to spread a little joy, of course. But my motives aren't entirely unselfish. By giving, I hope to receive something -- the gift of deeper insight into the meaning of Christmas. After all, it all started with the greatest Gift the world has ever seen.

Sandy Grove Church Holding Yule Bazaar

Sandy Grove United Methodist Church will be holding the annual Christmas Bazaar at the church annex, Saturday from 9 a.m. until 2 p.m.

Plans for the day include handicraft items, a bake sale, preserves, jams, pickles and a Snack Bar featuring homemade soup, hot dogs, ham biscuits and desserts.

Tickets for a drawing for a hand crocheted afghan, a handmade doll crib and a soft sculptured doll can be obtained from any church member, or at the Bazaar on December 4.

Everyone is welcome. Sandy Grove is about 8 miles Southeast of Raeford on Rural Road #1003.

Canned hams and picnics should be refrigerated unless direction on the label specify that refrigeration is not necessary.

Rome Beauty apples are a good choice for baked apples because they retain their shape when cooked. For "eating out of hand," Red Delicious are good.



NEW HOME. The old bell and steeple of First Baptist Church of Raeford were being set up in the area behind the old and new sanctuary buildings last week for continued life. They were taken from the old frame sanctuary building as the new building was being completed. The belfry's original exterior is being replaced by new material. The old building's life also is being continued, for educational programs.

House Calls Sidestepped

Editor's note: This opinion essay was written by George Beckwith, M.D., a practicing cardiologist from New Bern.

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Why don't doctors make house calls anymore? I think this is a very important question, and I think it deserves an answer.

First of all, I think we should look at the developments in the last 50 years in overall medical services provided by physicians, by nurses, and by hospitals.

Seventy years ago, my grandfather was practicing medicine in Petersburg, Va.

I remember my father telling me how he would go out in the middle of the night, in his horse and buggy, and make house calls in the dead of winter.

I remember well my father, when he was practicing medicine in Clifton Forge, Va., would make rounds at the hospital and invariably stop by and make house calls on elderly patients on his way home.

I often would go with him and occupy my time in the car while he would take care of these patients.

As the years went by, however, and he returned to the University of Virginia, the frequency of house calls became less and less. I really didn't think about it until I started

practicing medicine.

Looking back on the last years of my father's practice, and these past few years of my practice, I see the overall quality of health care increasing.

The introduction of penicillin was a dramatic break-through in the 1940s.

In the late 50s and early 60s the care of the cardiac patient improved dramatically with defibrillators and coronary care units.

In other words, the doctor now has tools to work with to diagnose patients earlier, more effectively,

and more successfully.

Many of my elderly patients are on at least three or four different kinds of medication.

The main point is that the overall quality of medical care has improved with these new tools. Without them, longevity of patients would decrease. The quality of medical care would decrease. We would essentially go back to 1940 again, when we would blindly give penicillin and listen to heart rhythms and heart rates, without taking electrocardiograms. We would make decisions on clinical judgment alone which might not be accurate.

Thus, when a patient needs to be

seen, especially in the elderly patients it is so vitally important that we utilize the tests available to us. This way, we can diagnose accurately and treat effectively to provide optimal medical care.

The bottom line being, there is a risk to the patient, as well as to the physician, to make house calls and not utilize the tools which are available for quality medical care at this time.

Unfortunately, quality medical care does carry a large price tag. One of the means by which physicians are trying to curb costs are with peer review organizations.

These, however, are patients who

are not having an acute problem, but who have chronic problems that I feel I can handle without the need for the quality tools that we have available in the office as well as in the hospital.

Granted this is a rare occasion.

Granted, this is a rare occasion. If a patient does become acutely ill, I do not feel that I can deliver quality medical care in at least 90% of the patients, without the services provided by the hospital or my office.

The era of the country doctor is gone; but in place, patients live longer, they get better treatment, and the physician does a better job.

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