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American Dental Association

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The annual American Dental Association Relief Fund campaign begins this month



### LET'S DOUBLE IT IN '49



11,000 ATTEND 90TH ANNUAL SESSION AT SAN FRANCISCO, OCT. 17-20... DR. PHILIP E. ADAMS IS INSTALLED AS PRESIDENT... DR. HAROLD W. OPPICE IS NAMED PRESIDENT-ELECT... DELEGATES APPROVE NEW SET OF PRINCIPLES FOR NATIONAL, STATE AND COMMUNITY DENTAL HEALTH PROGRAMS... REITERATE OPPOSITION TO FEDERAL COMPULSORY HEALTH INSURANCE... CHARTER IS GRANTED TO NEW TERRITORIAL SOCIETY FOR ALASKA... LABORATORY ACCREDITATION PLAN TURNED OVER TO STATE SOCIETIES... SPECIALTY BOARD CREATED FOR ORAL PATHOLOGISTS... SENATOR HUNT ANNOUNCES NEW PLAN FOR VOLUNTARY HEALTH INSURANCE TO BE OPERATED BY THE FEDERAL GOVERNMENT... "CLINICAL TRIAL" ACCEPTANCE OF THERAPEUTIC PRODUCTS IS ELIMINATED... PROPOSED DUES INCREASE IS DEFERRED UNTIL 1950 SESSION... BUDGET TOTALLING \$1,295,563 IS APPROVED FOR NEXT YEAR... 1950 SURPLUS ESTIMATED AT \$8,937... 514 ELECTED TO LIFE MEMBERSHIPS... GOAL OF \$100,000 SET FOR 1949-50 RELIEF FUND DRIVE... REJECT PLAN TO ASK CONGRESS TO INCLUDE DENTISTS UNDER FEDERAL SOCIAL SECURITY SYSTEM.

Adoption of a set of broad principles for the development of national, state and community dental health programs and a restatement of opposition to President Truman's proposal to enact a federal system of compulsory health insurance were among major actions taken at the 90th annual session of the A.D.A. at San Francisco, Oct. 17 to 20. Total attendance reached 11,000, setting a new post-war record.

INSTALL DR. ADAMS AS NEW A.D.A. PRESIDENT

Dr. Philip E. Adams, of Boston, was installed as president of the A.D.A. at the final meeting of the House of Delegates

Thursday afternoon, Oct. 20. Dr. Adams, who formerly served as a member of the A.D.A. Board of Trustees and was secretary of the Massachusetts Dental Society for 20 years, succeeded Dr. Clyde E. Minges, of Rocky Mount, N.C. Dr. Harold W. Oppice, of Chicago, was unanimously named president-elect. At the opening of the annual session, Dr. Oppice announced his resignation as the Illinois member of the Board of Trustees, a post he held since 1944. Dr. B. C. Kingsbury, of San Francisco, chairman of local arrangements for the four-day meeting, was unanimously elected first vice president, succeeding Dr. Leo W. Kremer, of Chicago. Dr. Don M. Hamm, of Clarksville, Ark., was elected second vice president, replacing Dr. Fayette C. Williams of Corinth, Miss., and Dr. Gerald G. Burns, of Rochester, N. Y., was elected third vice president, succeeding Dr. Leo M. Boire, of Portland, Ore.

DR. P. T. PHILLIPS IS REELECTED AS SPEAKER

Dr. Percy T. Phillips, of New York City, was reelected as speaker of the House of Delegates. Dr. Harold Hillenbrand, of Chicago,

secretary, and Dr. H. B. Washburn, of St. Paul, Minn., treasurer, were reappointed. Dr. C. I. Taggart, of Burlington, Vt., was elected to a three-year term as a member of the A.D.A. Board of Trustees for the New England district, succeeding Dr. Henry Hicks, of Greenwich, Conn. Dr. L. H. Jacob, of Peoria, was elected as the Illinois district trustee to serve out the unexpired term of Dr. Oppice who resigned to become president-elect. Three other trustees were reelected for three-year terms. They are Robert P. Thomas, of Louisville, who represents the states of Kentucky, Tennessee, Missouri and West Virginia; Dr. J. B. Carr, of Indianapolis, who represents the states of Indiana and Ohio; and Dr. C. S. Foster, of Cedar Rapids, Iowa, who represents the states of Iowa and Minnesota. By a vote of 187 to 142, delegates chose St. Louis over Cleveland for the 1952 annual session of the Association. The 1950 meeting will be held at Atlantic City, N. J., and the 1951 meeting will be at Washington, D. C. Delegates voted to hold the 1952 meeting during the month of September.

### OUTLINE PRINCIPLES FOR DENTAL HEALTH PROGRAMS

A broad set of principles for the development of national, state and community dental health programs was adopted by the House of Dele-

gates. The statement, which reiterated the A.D.A.'s opposition to federal compulsory health insurance, urged that children be given a priority for dental health services in community programs. Among the thirteen main points listed for the national program was the declaration that "dental care should be available to all regardless of income or geographic location as rapidly as resources will permit." The statement recommended that a federal department of health with cabinet status be established independently of welfare and educational agencies to coordinate all federal health activities except those of the military services. Other major points called for the expansion of facilities for the training of dental personnel, increased government and private support of research, the construction of additional dental facilities in all hospitals and health centers and the creation of dental health divisions in all state health departments. The statement also urged that voluntary prepayment and postpayment plans consistent with sound experience be adopted and called for the participation of A.D.A., state and district society representatives in the planning of dental health programs. The statement endorsed the principle of federal grants-in-aid to state and communities for the development of state and community programs and called for the establishment of short postgraduate courses which would be available regularly to every practicing dentist. Pointing out that there is a need for finding a more satisfactory financing plan to meet dental health service costs, especially for medium and low income groups, the statement suggested the "desirability of establishing experimental voluntary prepayment and postpayment plans." In all cases, communities should have the determining voice in the planning and operation of local programs, the statement said. Seven objectives for community dental health programs were listed as:

- 1. Help every American appreciate the importance of a healthy mouth.
- 2. Help every American appreciate the relationship of dental health to general health and appearance.
- 3. Encourage the observance of dental health practices, including personal care, professional care, proper diet and oral habits.
- 4. Enlist the aid of all groups and agencies interested in the promotion of health.
- 5. Correlate dental health activities with generalized health programs.
- 6. Stimulate the development of resources for making dental care available to all children and youth.
- 7. Stimulate all dentists to perform adequate dental health services for children.

1950 BUDGET SET AT TOTAL OF \$1,295,563

A total of \$1,295,563 in appropriations for the operation of Association agencies during 1950 was budgeted by the House of Delegates.

Income for next year was estimated at \$1,304,500, leaving an anticipated surplus of \$8,937. Major appropriations included \$256,135 for administrative expenses, \$384,209 for bureaus and departments, \$41,160 for annual session expenses, \$277,819 for councils, \$3,975 for advisory committees, and \$332,265 for publications. Included in the latter was an appropriation of \$309,070 for The Journal of the American Dental Association. The sum of \$71,040 was appropriated for the special program of the Bureau of Public Information relating to compulsory health insurance. Major items of estimated income included \$808,000 from membership dues, \$165,500 from advertising, and \$105,000 from the sale of dental health education literature. A proposal of the 13th district state dental associations that annual dues be increased from \$12 to \$20 was postponed for consideration at the 1950 meeting.

SENATOR HUNT PROPOSES NEW INSURANCE PROGRAM A voluntary health insurance system to be operated by the federal government in much the same manner as the Veterans Adminis-

tration now provides life insurance for veterans was proposed by U. S. Senator Lester C. Hunt, (D., Wyo.) in a talk at the general session of the convention at the Fairmont Hotel, Tuesday evening, Oct. 18. Sen. Hunt, who is the only dentist now serving in the Senate, proposed that the government sell policies with "deductable clauses" requiring patients to pay the first \$50 or \$100 of the cost of each illness, thus protecting health practitioners from a deluge of patients with minor complaints. Otherwise, the proposed policies would cover all costs of medical, dental, surgical, hospital, laboratory and nursing care, he said. Sen. Hunt said he would introduce a bill to create such a health insurance agency in the federal government provided the A.D.A. and the A.M.A. endorsed his plan. He also said he favored establishment of a new federal department of health with cabinet status but separate from educational and welfare activities of the federal government.

FEDERAL AID TO EDUCATION IS ENDORSED IN PRINCIPLE

By a standing vote which carried by a majority of approximately two to one, delegates endorsed the principle of federal aid to

education. The statement adopted by the House declared that "federal funds, with justification, might be appropriated in support of dental educational programs, provided that such funds should be accepted only with the understanding that the government shall not exercise any control over, or prescribe any requirements with respect to, the curriculum, teaching personnel, or administration of any schools, or the admission of applicants thereto." The House approved the establishment of a new specialty board for oral pathologists, increasing to six the number of recognized dental specialties. Authorization was granted the Council on Dental Education to place its aptitude testing program on a nation-wide basis beginning with the classes entering in the fall of 1951. A motion to increase student dues from \$3 to \$4 annually was defeated when it failed to secure a two-thirds majority vote required by the constitution and bylaws.

REJECT "CLINICAL TRIAL"
RATING FOR DENTRIFICES

The House of Delegates approved a majority report of the Council on Dental Therapeutics that that the A.D.A. should discontinue its

practice of giving favorable recognition to experimental products by means of listing or acceptance for clinical trial. To date, four ammoniated dentifrices -- Amurol, Craig-Martin, DyBasik and Ingram -- had been accepted for clinical trial. This limited acceptance of these products is now withdrawn. A special committee of five members, including the chairmen of the Councils on Dental Research, Dental Museum and Registry and Dental Therapeutics, and two trustees, was named to make a survey of the Association's present research program. The sum of \$20,000 was voted for a special research study of the physical and chemical properties of enamel to be conducted at the U. S. Bureau of Standards.

### ALASKA AWARDED NEW CONSTITUENT CHARTER

A new constituent society was created for the Territory of Alaska and 30 Alaskan dentists were accepted as charter members of

the new A.D.A. unit. This new society brought to a total of 54 the number of A.D.A. constituent societies. A total of 514 dentists was elected to life memberships, approximately 100 dentists from 18 foreign nations were admitted as affiliate members, and three non-dentists were admitted as associate members. Consideration of a proposal to revise qualifications for life membership in the Association was tabled until the 1950 meeting.

## WITHDRAW ENDORSEMENT OF SOCIAL SECURITY MEASURE

Pointing out that the "real security of the professionally self-employed lies within the individual and in his contribution to the com-

munity rather than in any government-sponsored system of old age insurance," the House of Delegates directed the A.D.A. Council on Legislation to oppose federal social security legislation which would include dentists. In this action, the House reversed a decision of the 1948 House in which the Association was placed on record asking Congress to include dentists under the provisions of the old age and survivors; insurance program of the federal government. Delegates also approved the establishment of the following priority list for the Council on Insurance in its development of an expanded insurance program for A.D.A. members: (1) increasing the benefits of the present line of group life insurance; (2) survey the field of group permanent insurance; (3) group annuity; (4) group accident and sickness insurance; (5) workmen's compensation; (6) professional liability; and (7) owners, landlords and tenants liability insurance.

### ACCREDITATION PLAN PUT ON STATE SOCIETY LEVEL

Revision of the A.D.A. accreditation plan for dental laboratories to permit state societies to assume full responsibility in changing the

policies and administration of the plan within their respective states was approved. The House also voted that it is the policy of the A.D.A. "to oppose in principle the enactment of all legislation for the regulation of dental laboratories and dental laboratory technicians on the grounds that such legislation is not in the public interest." The resolution on this item pointed out that it was not the intention of the House to preclude any changes which individual states may wish to make in their dental practice acts. In another action, the House directed the Board of Trustees to transmit a letter to Gov. Chester Bowles of Connecticut pointing out that the A.D.A. delegates believed that the governor did not have competent knowledge of the dental problems involved when he vetoed measures passed by the Connecticut legislature to control dental laboratories. The House resolution said that the governor's veto message was 'partially based on the unrealistic belief that prosthetic dentistry could be separated from the other branches of dentistry which make up the essential health service that dentistry renders." The Board was instructed to inform Gov. Bowles that the full resources of the Association would be available to the governor and the state dental society "in the interests of securing that type of legislation which will enable the people of that state to avail themselves of the highest quality of dental service." (See A.D.A. News Letter, May 15, 1949.)

## REJECT DEMAND FOR "FULL AUTONOMY" OF DENTAL CORPS

While pointing out that the dental corps of the armed forces should be permitted to function as an independent health service,

the House turned down requests that the Association seek federal legislation which would establish dental corps as entirely separate from the medical corps. A resolution adopted declared that "it shall be the policy of the A.D.A. to seek conditions under which dentistry and medicine can function independently under the general coordination provided by a department of health..." The Council on Legislation was instructed to seek the achievement of this objective as rapidly and forcefully as possible by the enactment of federal legislation.

## BOARD NAMES FOUR NEW CHAIRMEN FOR COUNCILS

Four new Council chairmen were appointed by the Board of Trustees following the election of new Council members by the House of

Delegates. The new chairmen are: Dr. Max Ernst, of St. Paul, Council on Constitution and Bylaws; Dr. R. W. McNulty, of Chicago, Council on Dental Education; Dr. Charles Wilkie, of Brooklyn, Council on Journalism; and Dr. E. Harold Gale, of Albany, Council on Legislation.

### OTHER ACTIONS

The House of Delegates postponed indefinitely consideration of pending recommendations that the number of delegates be reduced. At

the present meeting, there were 379 officially accredited delegates. A recommendation of the special survey committee that term of office of trustees be limited to two consecutive terms of three years each was approved. A recommendation that the tenure of office of council members also be limited to two terms was rejected. Also rejected were recommendations of the survey committee that an additional trustee district be created in New York and that the offices of second and third vice presidents be eliminated. Action on a proposal to assign the functions of the Council on Hospital Dental Service to the Council on Dental Education was deferred. It was agreed that a proposed amendment making this transfer of duties would be prepared for consideration by the delegates at the 1950 meeting. The House voted its disapproval of a proposal that dental nurses be permitted to provide limited children's dentistry after two years of training. A proposal to change National Children's Dental Health Day from the first Monday in February to a date in May was rejected. Action on a proposed revision of the Association's Code of Ethics was deferred until 1950. The appointment of Dr. P. C. Lowery, of Detroit, as a member of the National Institute of Dental Research Council was announced during the session by Dr. Bruce D. Forsyth, chief dental officer and assistant surgeon general of the U. S. Public Health Service.

#### BRIEFS IN THE NEWS

The A.D.A. soon will begin a campaign to replace dental textbooks and reference works in 22 war-devastated libraries in Europe, according to Dr. Stanley D. Tylman, chairman of the A.D.A. Council on International Relations and A.D.A. representative on the U.S. National Commission for UNESCO. At the San Francisco A.D.A. meeting, Dr. Tylman announced that dental books valued at more than \$8,000 have been made available to European libraries by the A.D.A. The new program will be operated through CARE. A goal of \$250,000 has been set for the campaign....Total A.D.A. membership reached 74,206 on Sept. 30. This included 64,938 regular members, 7,218 student members, 2,050 life members and 295 affiliate members....Dr. Maurice J. Hickey has been appointed associate dean for dentistry in Columbia University's Faculty of Medicine. He replaced Dr. Bion R. East, now chief of the dental service of the Veterans Administration. Dr. Hickey is a graduate of Harvard School of Dentistry and received his D. M. D. degree from the College of Physicians and Surgeons, San Francisco....According to the Veterans Administration, more than 83,000 World War II veterans are studying medicine, dentistry and related subjects under the G.I. Bill and Public Law 16. There are 7,603 studying dentistry under the G.I. Bill and 904 under Public Law 16.... More than 22 per cent of the entire population of the United States was protected by Blue Cross plans for hospital care on June 30 of this year.

This special publication of the <u>A.D.A.</u> News <u>Letter</u> is a combination of the Oct. 15 and Nov. 1 issues, covering the recent A.D.A. session in San Francisco, Oct. 17 to 20.

# GOAL OF \$100,000 IS SET FOR A.D.A. RELIEF FUND CAMPAIGN -- MEMBERS ASKED TO DOUBLE THEIR CONTRIBUTIONS OF LAST YEAR



A goal of \$100,000 has been set for contributions for the A.D.A. Relief Fund in the 1949-50 campaign opening Nov. 1, it is announced by the Council on Relief. A.D.A. Christmas seals, traditional reminders of the annual campaign, will soon be mailed to all members of the A.D.A., it was announced by Dr. John S. Owens, of Camden, N. J., Council chairman. The slogan for this year's campaign is "Let's Double It In 149." Last year the amount paid out in grants to needy dentists was slightly more than the yearly contribution to the fund, and this year's applications for relief

grants are running three times higher than in 1948. In last year's campaign \$61,322.89 was contributed towards a quota of \$100,000. Though the quota for the new campaign remains the same, individual state society quotas have been readjusted to compensate for changes in membership. This will be the second year under a new policy in which the A.D.A. contributes two-thirds of each grant to needy dentists and the state society contributes the other one-third. One-half of all contributions during the 1949-50 campaign will be returned to the state societies for their respective relief funds. Quotas for each of the constituent societies for the 1949-50 campaign and the actual contributions from all members of each constituent unit last year are contained in the following list. All contributions should be mailed directly to the American Dental Association Relief Fund, 222 E. Superior Street, Chicago 11, Ill.

	1949-50 QUOTA	, (	1948-49 CONTRI- BUTIONS		1949-50 QUOTAS	1948-49 CONTRI- BUTIONS
Alabama	\$ 810.	00 \$	1697.00	Nebraska	1160.00	934.00
Arizona	260.	00	264.00	Nevada	100.00	75.50
Arkansas	490.		207.50	New Hampshire	410.00	151.00
Air Force*	150.00*			New Jersey	4290.00	2641.00
Army	360.	00	186.50	New Mexico	190.00	134.00
California	3640	00	2224.62	New York	15560.00	8361.88
Southern California	4340.	00	4700.50	North Carolina	1190.00	1152.00
Colorado	880.	00	681.00	North Dakota	340.00	405.00
Connecticut	1940.	00	1549.00	Ohio	4910.00	2443.33
Delaware	150.	00	71.00	Oklahoma	920.00	492.50
District of Columbia	810.	00	1600.00	Oregon	1150.00	894.00
Florida	1180.	00	720.00	Panama Canal Zone	30.00	36.00
Georgia	1020.	00	478.00	Pennsylvania	7260.00	3685.50
Hawaii	360.	00	300.00	Public Health Service	300.00	56.50
Idaho	270.	00	162.50	Puerto Rico	290.00	74.50
Illinois	7640	00	4494.00	Rhode Island	530.00	201.00
Indiana	2340	00	1345.00	South Carolina	380.00	204.50
Iowa	1910.	00	1078.25	South Dakota	350.00	125.00
Kansas	1130.	00	760.92	Tennessee	1100.00	869.50
Kentucky	1100	00	825.00	Texas	3040.00	1421.50
Louisiana	1040	00	388.20	Utah	470.00	363.00
Maine	420	00	224.00	Vermont	210.00	100.50
Maryland	1040	00	565.00	Veterans Administra	tion 980.00	249.00
Massachusetts	3780	00	1541.00	Virginia	1120.00	655.00
Michigan	3900	00	2129.00	Washington	1680.00	1178.50
Minnesota	3060	00	1634.08	West Virginia	730.00	526.00
Mississippi	500	00	360.10	Wisconsin	2990.00	1184.51
Missouri	2670	00	2050.50	Wyoming	170.00	102.00
Montana	340	00	210.00	Mile out to accession	1 3 0	
Navy	710	00	149.50	TOTALS	\$100,000.00	\$61,312.89

<sup>\*</sup> Formerly included with Army