



THE FIRST FIFTY YEARS

1929 – 1979

By

John J. Delaney, M.D.

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The Texas Association of Obstetricians and Gynecologists
1929 – 1979

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The year 1929 was a memorable year. It was the year of the 1929 Wall Street Stock Market crash and the beginning of the great Depression. It also marked the introduction of the Model-A Ford to replace the old Model-T workhorse. Swift's Premium has retailed for 31 cents a pound and seven railroad lines in Galveston announced a roundtrip excursion rate to Houston of \$1.00 per person.

The Annual Meeting of the Texas Medical Association was held in Brownsville, Texas, on May 6, 7, and 8, 1929. At this meeting a group of 8 physicians interested in obstetrics and Gynecology conceived the idea for an association for the furtherance of the teaching and betterment of the practice of their specialty. Calvin R. Hannah, of Dallas headed this group which included Willard R. Cooke of Galveston, J. L. Jinkins Sr., of Galveston, Albert Dunlap of Dallas, Herman Johnson of Houston, Robert M. Johnston of Houston, Minnie Maffett of Dallas, and G. V. Morton of Fort Worth. The group decided to meet again the following May at the next Annual Meeting of the Texas Medical Association in Mineral Wells. Other interested physicians would also be invited.

This Brownsville session of 1929 was attended by 1,022 people, 695 physicians and 327 of their 'womenfolk'. Of the latter, 181 were members of the Women's Auxiliary. Because the meeting place was not centrally located, the large attendance was amazing. Most people arrived by train with reservations being at a premium. A few hardy individuals drove in automobiles on somewhat questionable highways. Although air travel was virtually unheard of, the Mexican Aviation Company offered free rides to physicians to acquaint them with the luxuries of travel by air. The plane was a Ford trimotor cabin plane elegantly fitted for passenger service.

(Although our organization was conceived in the magic valley, it did not return to that valley for 47 years. In the year 2979, President Bill McGanity and Secretary Dennis Voulgaris insisted that we return. This meeting was held in McAllen and was an outstanding success.)

At the May, 1930 meeting of the Texas Medical Association in Mineral Wells, Texas, after a rather prolonged gestational period, the association was delivered and organizational procedures were developed. The year 1930 also saw the introduction of flash bulbs, coin operated pinball machines, and scotch tape. It was the year when airline stewardess' first replaced male couriers on Boeing's air transport 18-passenger biplanes from Chicago to San Francisco. People were singing "I've Got Rhythm", "Three Little Words", and "Walking My Baby Back Home". Movie fans loved Greta Garbo in "Anna Christi" and Marlene Dietrich in the "Blue Angel". On college campuses, goldfish swallowing was the rage, and back in Mineral Wells, the organizational meetings were held at the Crazy Hotel.

Before this meeting, stormy weather hit the entire state. Physicians again needed to use the railroads for transportation because automobiles were so unreliable. Cash was very short at this time. The doctors, who were not as affluent as they are at the present time, drove Fords, Hupmobiles, Essex, Paiges, Studebakers, Buicks and Franklins, many of which are now extinct.

A tremendous amount of leg work had been done throughout 1930. Those present at the TAOG organizational meeting, besides those attending in Brownsville, included W. W. Maxwell, E. L. Bertner, M. S. Sealy, B. H. Passmore, H. L. Kincaid, W. H. Hargis, Fred B. Smith, and A. F. Beverly. Committees were formed and the members selected a slate of officers. A Constitution and By-Laws was also formulated.

It is not clear how the name of the organization was chosen. The official name was The Texas Association of Obstetricians and Gynecologists. Apparently, the Texas Surgical Society, the Texas Pediatric Society, and the Texas Interurban Club of Internists had been in existence for several years. Therefore, the word "association" was preferred to that of society or club.

Article II of the Constitution: "Object of the Association" is noteworthy! To wit: "The object of this Association shall be the cultivation and promotion of knowledge in whatever relates to obstetrics and gynecology and such other matters as may become legitimately within its sphere".

The organization voted not to have its annual meetings at the same time and location of the Texas Medical Association, as most other specialty societies were urged to do. The meetings were to be held in the early fall, usually in the first week of October. The early meetings consisted of clinics in the morning put on by the local members, followed by an afternoon program of scientific papers and discussions.

The first annual meeting of the organization was held in Galveston on October 4, 1930. The officers included: President, C. R. Hanna, Dallas; First Vice-President, G. V. Morton, Fort Worth; Second Vice-President, W. W. Maxwell, San Antonio; Secretary, Robert A. Johnston, Houston; and Treasurer, Minnie L. Maffett, Dallas. Morning clinics were conducted by W. R. Cooke, J. L. Jinkins, Sr., and H. Reid Robinson. After a luncheon at Gaido's, the visiting physicians inspected the new out-patient clinic building at John Sealy Hospital. In the afternoon, papers were contributed by E. W. Bertner, Houston, Lee Miles, Waco, and Herman Johnson, Houston.

At the business meeting the Association voted to establish an annual lecture or address. This was named the J. F. Y. Paine Address in honor of the late John Fannin Young Paine, the first professor of Obstetrics in the Texas State Medical College. This address was to be given at the annual meeting by a distinguished out-of-state guest. The expenses of the guest lecturer were to be paid by the Association.

(John Fannin Young Paine received his medical degree from Tulane in 1861. He practiced in Mobile for a short time, then accepted the Chair and Professor of Obstetrics at the Texas Medical College in Galveston, the first medical teaching institution in Texas. He also was Dean of this school until 1881 when the Medical College disbanded. He then went to Tulane. In 1886 he came back to Galveston and organized the Medical Branch of Texas University and accepted the Professorship of Obstetrics and Gynecology. He was President of the Texas Medical Association in 1888.)

In the first years of the Association each President gave a Presidential address at the annual banquet. In later years, due to time limitations, the Presidential address was discontinued. In Galveston, Calvin R. Hannah, President, presided and gave the Presidential Address. At the conclusion of the scientific program the visiting physicians were guests at a banquet at the Galveston Country Club with William Keiller, Professor of Anatomy at Galveston, John W. Burns, President of the Texas Medical Association, and George E. Bethel, Dean of the Medical College at Galveston, as special guests.

After this humble beginning, the Texas Association of Obstetricians and Gynecologists was on its way to becoming one of the foremost professional organizations in our nation. Our start heralded an era of progress. In the early years there were no antibiotics, blood transfusions were a rarity, anesthesia was more or less primitive and frequently invited disaster, and electrolytes were unheard of. On the other hand, it was an era in which the art of medicine predominated. In obstetrics, vaginal examinations were taboo, and rectal examinations told of the progress of labor. Labor was often prolonged and the cesarean section rate was held at less than 2%. When a section was done, the extra peritoneal or exclusion operation was frequently performed. Herman Johnson of Houston often amazed his colleagues by his application of forceps, then guiding the fetal head through the birth canal gently and without trauma.

The second annual session was held October 15, 1931, at Baylor Hospital in Dallas. Willard R. Cooke, Galveston, was President, and Robert A. Johnston, Houston, was Secretary.

(Willard Richardson Cooke, a native of Galveston and a graduate of The University of Texas Medical Branch in 1912 was made Professor of Obstetrics and Gynecology of that school in 1924. He served as Chairman of the Department until his retirement in 1954. He was a founder and second president of the Texas Association of Obstetricians and Gynecologists. He was also president of both the American and Central Association of Obstetricians and Gynecologists. He was a long time member of the American Board of Obstetricians and Gynecologists and was dedicated to the teaching and practice of his specialty. He is to be remembered as a teller of tall tales.)

At this second annual meeting, obstetrical and gynecological clinics were held in the morning by members of the society who lived in Dallas. At noon the Baylor Hospital complimented members and guests of the Association with a luncheon in the Nurses' Home. In the afternoon, scientific papers were presented by members of the Association who lived outside of Dallas.

The guest of honor at this meeting was Fred L. Adair, M.D., Professor of Obstetrics and Gynecology at the University of Chicago. Doctor Adair delivered the J. F. Y. Paine Address. The banquet was held at the Dallas Country Club. The following officers were elected to serve during the following year: President: Robert Johnson, Houston; Secretary, Minnie L. Maffett, Dallas.

(The first secretary of the Association was Robert Johnston, who served during 1930 and 1931. The secretaries had to do all the hard work and literally carried, directed and affected the various functions and activities of the organization. The average stint of duty as a secretary was about 4 to 5 years. At the end of that time, he or she was "rewarded" by being elected to the Presidency of the Association.)

Several individuals should be heartily thanked for all the work that they have done and all the effort they have expended throughout the years. Minnie L. Maffett served as Secretary from 1932 through 1939; Julius Mclver from 1940 through 1947; George Adam from 1948 through 1951; Carey Hiett from 1952 through 1955; Oran Prejean from 1956 through 1960; Hugh Savage from 1961 through 1965; James Downs from 1966 through 1968; Jack Jinkins, Jr., from 1969 through 1972; Dennis Voulgaris from 1973 through 1976, and William Nash from 1976 through 1979. The present incumbent is George Coale, III.

In the early years the Secretary carried a folder of papers in a small briefcase. Later the papers conceived and multiplied. Now they are crammed into two footlockers. Jack Jinkins will attest to the fact that lifting them into the trunk of his car gave him not only a hernia, but also, later, a recurrence.

The third annual meeting was in Houston, October 1, 1932, with a splendid attendance. The luncheon was held at the Rice Hotel. At the business meeting, 15 applicants were recommended and later approved for membership. To safeguard the quality of membership, more stringent rules were recommended. It was anticipated that only those physicians who did at least 80% gynecology and obstetrics in their practice would be eligible for fellowship in the Association. Requirements for admission into the Association were the same as those of the American College of Surgeons and other outstanding gynecologic and obstetric association. The Association accepted the invitation of the American Journal of Obstetrics and Gynecology to make it the official organ of publication.

The Executive Council of the Association consisted of the President, the President Elect, the Vice-President, the Secretary and Treasurer, the retiring President, and one other member elected annually and served for a term of three years. For several years, the Chairman of the Section on Obstetrics and Gynecology of the Texas Medical Association was an ex-officio member of the Executive Council. The original Executive Council consisted of six members. In 1939, three other members, elected for a three year terms, were added to the Council, bringing the total to nine members. At the present time, our Executive Council has fourteen members.

For the first fifteen years, the Executive Council met twice a year in mid-Spring, and the day preceding the annual meeting. At these meetings, routine business matters were attended to, applications of new members were approved, and the financial state of the Association was reviewed. In 1948 the Secretary, George Adam, suggested that there be only one yearly Council meeting to be held on the day preceding the annual meeting. The Council approved of his suggestion and voted to support it.

(The final paragraph of the Transactions of the Executive Council, Fort Worth, May 13, 1942, is as follows: "There was no other business and the meeting was adjourned with a rising vote of thanks to Doctor Grogan for a delicious chicken breakfast"... Now what the hell is a chicken breakfast? Unfortunately, all those who participated are now gone—so we may never know.)

The fourth meeting of the Association was held in San Antonio on September 30, 1933. In the minutes of this meeting there appears a paragraph, "Doctor and Mrs. Cutter will be glad to have the Doctors come to their home after this meeting for the purpose of investigating the bottoms of some glasses." In 1933, the Volstead Act was still in force. Although this Act was rescinded in September of that year, it is not clear whether the glasses contained bootleg or prescription whiskey.

In 1934 the membership rose to a total of 56. During the annual meeting a resolution was proposed that would limit the fellows to a maximum of 75 who shall be residents of the State of Texas. However, the Association did not pass this motion and retained the maximum membership at 100.

The seventh annual meeting was held at the Adolphus Hotel in Dallas on October 31, 1936. The President, J. L. Jinkins, Sr., of Galveston presided.

(Doctor Jinkins, a native of Normangee, is the senior member of the Association. He received his doctorate of medicine in 1916 at UTMB and after 63 years is still in active practice. He presently is Clinical Associate Professor in the Department of Obstetrics and Gynecology at the Medical Branch. His memberships include the Central Association of Obstetrics and Gynecology, Fellow of the American College of Surgeons and the American Society for the Study of Sterility. In 1936 he organized a Sterility Clinic for the Department of Obstetrics and Gynecology which he equipped at his own expense. Historically, it is revealed that this clinic was the second such to be founded in the United States.)

At this meeting, the Medical Record and Annals published by the Postgraduate Medical Assembly of South Texas was approved as the official publication of the organization. A report from the Committee on Maternal Welfare headed by Doctor Hannah was read and approved. This, in essence, was the report: "Our two Texas organizations, the State Medical Association of Texas and the Texas Association of Obstetricians and Gynecologists should work together in every way possible in developing a plan for maternal welfare work. First: To safeguard the life and health of the mother, especially by decreasing the number of infections following abortion and childbirth, and by the control of the toxemia. Second: The desirability of an increase in the number of fruitful pregnancies by decreasing the incidence of sterility, by reducing the number of abortions and premature births, and by attempting the prevention of still-births. Thirdly: The urgent need of more and better maternal care during the prenatal and postnatal periods, and fourthly, the concrete results in the improvement of conditions surrounding maternity and early infancy must depend largely on general application of existing knowledge and on further investigation of the many problems which contribute to morbidity and mortality of both mothers and infants. The efficiency and maternal service must be improved and in order to secure this improvement, students and physicians must be taught the fundamentals of obstetrics and how to conduct labor to combat the present day wave of unnecessary operative obstetrics. The Association of Obstetricians and Gynecologists must carry the responsibility of leading this program in the State of Texas."

At the morning session of this meeting, the guest speaker, G. D. Royston, Professor of Ob/Gyn, Washington University, St. Louis, examined and discussed five cases presented to him by the local members. They are fairly representative of the times:

- Case One: Embryonal carcinoma of right ovary, grade 4 in girl, age 14. Doctor Royston: "Ovarian tumors in young people are more likely to be malignant. The younger the individual, the higher the degree of malignancy". Several points suggested: (1) no menstrual difficulty (2) rapid growth suggestive of malignancy (also, hardness of structure). All tumors will justify exploratory operations; all ovarian tumors, cysts, etc, should be considered malignant until definitely proven otherwise. Advised: (1) milk, cream, emulsified cod liver oil, etc, (2) outdoor exercise. Prognosis: Guarded, but fairly good, chiefly because this condition was detected early and has had radiation.
- Case Two: Primary anterior lobe deficiency – patient was first seen 2 ½ years ago and since that time was given 112 ampules of antuitrin and thyroid. The patient is 14 years of age, stopped growth at 10 years of age, no external sexual development. Doctor Royston: "Features of hypopituitarism in failure of long bones to grow normally; dwarfish involving BP. Many of these cases show a low sugar. There is probably a hypogonadism present. This depends upon pituitary deficiency". Advised: (1) Theelin, (2) sugar tolerance, (3) high vitamin diet (to increase height, size, etc), eggs, tomatoes, citrus fruits, milk and green vegetables. Prognosis: Guarded at best.
- Case Three: Pregnancy complicated by tuberculosis in a woman 32 years of age – Uterus containing several fibroids. Doctor Royston: "Examined patient; most fibroid uteri do not become pregnant. Tuberculosis does not affect pregnancy nor does pregnancy affect the tuberculosis. One has the choice of a myomectomy (mortality higher) and hysterectomy (postoperative neurasthenic); size of uterus (nodular) is out of proportion to duration of gestation. 80% of the fibroids are in the lower segment of the uterus – old belief. Pregnancy with tuberculosis equals abortion (patient then promptly dies of tuberculosis)". Advised: (1) watch for recurrence of tuberculosis closely, (2) ten hours of sleep, avoid fatigue, (3) high caloric diet, well balanced; one quart of milk, 4 eggs, meat, etc., and rest following each meal. It is doubtful that the patient will go to term. Labor should not be permitted to go through a long second stage; do an episiotomy and forceps delivery. Patient should not nurse the baby. Weight gain may be the result, but not the cause of toxemia. If the patient has long labor, a cesarean section should be done; if myomectomy done now, patient might abort. If there is any doubt in the physician's mind as to the operation during pregnancy, he should wait. Postpartum care: As with other patients, but should be more alert for red degeneration. Separate the child from the mother; put it under another roof if possible. If the mother develops any suggestive symptoms, treat the tuberculosis and ignore the pregnancy.
- Case Four: Patient 17 years of age, 7 ½ months pregnancy, pre-eclamptic, primipara. Negative blood chemistry. Doctor Royston: "If the patient is getting worse, terminate the pregnancy. If improving, would advise: (1) bed rest, absolute quiet, mental and physical rest, (2) protein diet, limit fats and salt, (3) induce labor by medical means; do not rupture membranes prematurely as there is a high infant mortality". Doctor Royston usually uses a low cervical transverse section rather than vertical, gets better peritonealization; however, if there is a vicious type infection, mortality will be high no matter what one uses.
- Case Five: Dystocia – subnormal pelvic measurements. Had a test of labor 48 hours and later a cesarean section. This was 4 years ago. Patient is now 7 month pregnant, question as to procedure. Doctor Royston: He examined the patient; diagonal conjugate 11 cm. "In this case one would have to wait until the patient goes into labor. To induce labor, (1) long walks, (2) two ounces of castor oil, (3) warm tub baths, (4) copious plain hot water enema in the morning (pain will get stronger following the enema; weak pain following castor oil will stop, (5) as pains get harder and closer together patient should proceed to the hospital. If no progress after a true test of labor, a repeat cesarean section". A question was raised if one should sterilize in these cases. Doctor Royston: Two

cesarean sections are really enough for any patient. After consent of family and of patient, tie tubes, cut between and bury ends in broad ligament”.

(These cases illustrate the fact that at this time in history, gynecology was practiced a little more scientifically than obstetrics, and that nutrition was on its way).

The Association met in conjunction with the Central Association of Obstetricians and Gynecologists on October 14, 15, and 16, 1937. All meetings were held at the Adolphus Hotel in Dallas. This was the eighth annual meeting of the Texas Association and the ninth annual meeting of the Central Association. The Texas Association had charge of the meeting on Thursday, October 14, 1937. For luncheon, members of the Texas Association and the Central Association were guests of Parkland Hospital for pit barbeque. The fellows were taken to and from the hospital in chartered buses.

At the afternoon session John A. Kolmer, the guest speaker of the Texas Association, gave the J. F. Y. Paine Address on “Maternal and Prenatal Syphilis with Special Reference to Diagnosis and Treatment”. The banquet for this meeting was held at the roof garden of the Adolphus Hotel.

(Our Association, which had its infancy in the depression, had a very humble beginning as far as finances were involved. There was an initiation fee of \$15.00 and the annual dues were set at \$5.00. When fellowship certificates were ready for distribution, it was necessary to make a charge of \$2.50 each to cover the expenses. Dues were seldom delinquent as delinquent members were reported to the Executive Council immediately. Out of the general fund were paid the necessary and usual expenses of the guest speaker and the expenses of the annual banquet. At the 1935 meeting, in order to insure better and more permanent financing, a motion was made, seconded and passed that from here on the membership would pay individually for the banquet. The banquet or annual dinner in the early years, until 1944, cost \$1.50 per person, and Dr. Jinkins, Sr., has said that they were served some of the best steaks he has ever eaten. In keeping with inflation, the cost has risen to \$2.50, then \$5.00, then \$15.00, then \$10.00, until now \$30.00 per person.)

In 1936, the Association earmarked \$50.00 for a merit award. This was to be given to a member or non-member who presented an outstanding paper. This later was increased to \$100 to be given to a resident in obstetrics and gynecology. This became known as the Award Paper. In 1945, in honor of the memory of Doctor Hannah, it was changed to the C. R. Hannah Award.

(Dr. Calvin R. Hannah was one of the organizers and the first President of the Texas Association of Obstetricians and Gynecologists. He was Professor of Obstetrics at Baylor Medical College from 1907 until his death in 1941. He was the 71st President of the Texas State Medical Association. His primary interest was always better obstetrics, both in practice and teaching. Charlie Powell was one of the early recipients of the C. R. Hannah Award.)

In 1967, the C. R. Hannah Award was replaced by the Calvin Hannah Lectureship to be given by one of the guest speakers. The Award, however, was retained and given as a resident’s prize in memory of Willard R. Cooke, whose death occurred in 1966.

At the 1937 business meeting, it was moved and passed that if and when the Association had \$1,000 in reserve it be put into postal savings, drawing 2% interest annually, or in government bonds.

In 1938, a special financial committee reported to the Association: “Therefore, it is the recommendation of this committee that the Association seriously consider the increase of dues to \$7.00 per annum from the present rate of \$5.00 per annum until such time as the accumulated surplus may be made revenue bearing and certainly can keep the Association from having a deficit each year”.

In 1938, the dues increased on the inflationary spiral to \$8.00; then to \$10.00 in 1946; \$15.00 in 1953; \$20.00 in 1959; \$25.00 in 1966; \$30.00 in 1970 and \$50.00 in 1977.

At the 1940 meeting in Marlin, a motion was made and passed to have the Association pay the expenses for meetings of the Executive Council, that is, breakfast, etc, and also give the Secretary an honorarium of \$50.00 each year for his expenses to and from the general meeting and the Executive Council meetings.

MEMBERSHIP GROWS RAPIDLY

In 1930 at the first annual meeting there were 22 founding members present. Membership rose rapidly and at the fifth annual meeting in Galveston, October, 1934, the Constitution was changed to read: "The fellows shall not exceed 75 who shall be residents of the State of Texas". Two years later, the Constitution was again changed, this time to increase the number of fellows from 75 to 100.

In 1947 it was voted to amend the Constitution in Articles 3, Section 1: "The membership shall be limited to 150 instead of 100." Then, 7 years later in 1954, this was changed to "Active members shall be residents of the state of Texas and in good standing with the county and state medical societies".

Even though the bars were let down, applicants were carefully screened. A list of proposed candidates for membership was sent to each member thirty days prior to the annual meeting. Each member could check the list with a mark (Yes, No, or Don't Know) by each name. This procedure is in effect today.

It was felt at this time, new young well-trained obstetricians and gynecologists could benefit by membership in the Association and that the Association would benefit from them. It has so proved.

Originally there were three types of membership: Active, Honorary, and Life. Active membership is self-explanatory. Active fellows are subject to the attendance rule, namely an unexcused absence of three consecutive meetings automatically suspends said individual. This had helped maintain the excellent attendance record.

At the annual session a business meeting follows the scientific program. At this business meeting the guest speakers are elected to honorary membership. Over the years there has accumulated a formidable list of honorary members.

Any active member who has reached the age of 60 may at his request to the Secretary be transferred to Life Membership. This procedure has been encouraged in order to create vacancies for new members. At age 65 an active member automatically becomes a Life Member. In 1939, a new classification of membership was added, Junior Fellows. They were elected for a three year term, then transferred to Active Status. In the discussion over this new membership, Dr. Hannah said that the Association had been founded for the purpose of education and the extension of interest in these two specialties and that he, therefore, unconditionally approved of Junior Fellows. This served the purpose of bringing younger members into the Association, but as the membership was increased, the classification of Junior Fellows was abandoned in 1951.

World War II more than decimated the membership. In 1942 there were 94 active members, 14 of whom were in the military service; by 1945, 27 of 99 active members were so engaged.

In 1944, 8 members were transferred from the Air Corps to the Ground Forces. They were stationed at a cold, damp, dismal, swampy camp in central Illinois. Here they were assigned to teaching, tent pitching, heavy bed making, latrine digging, etc., until they were assigned to field hospitals, convalescent hospitals, medical dispensaries, and shipped abroad.

In 1949, the Constitution was again changed to create a new membership known as the "Armed Services Membership". These members met all the requirements of Active members except that of the three-year Texas residency and they did not pay dues and did not hold office. However, they did have all other privileges of active members.

TAOG PROMOTES MATERNAL WELFARE

The Association has always been interested in maternal welfare. The 1933 White House Conference on Maternity and Infancy was attended by several members.

A committee reported annually to the Association on the status of obstetrical practice in the State of Texas. In 1936, the committee reported that 3 to 4 districts had held meetings to teach better obstetrics and child health. Money was obtained for these meetings from the State Health Department through the Social Security Act.

In 1941, the Association used its influence to have the state Public Health Association recognize organized planned parenthood as a public health measure. In 1950, the Association became interested in the new specialty of cyto-pathology. Many members did their own cytology. The Texas Society of Pathologists, Inc. was contacted in regard to the training of cytologists throughout the state, listing of pathologists in Texas qualified to do cytology, and encouraging statewide use of the taking of cytologies.

The TAOG in its history to date has promoted continuing education for its members and any others concerned. The papers presented at the meetings have been well thought out and screened for vital pertinent information.

Guest speakers have been imported from the entire nation. The list of Honorary Members from the past to present looks like the "Who's Who" of Obstetrics and Gynecology. Actually, if you carefully peruse this list, it represents the whole history of obstetrics and gynecology in the United States.

In 1977, to pursue further educational endeavors, the annual meeting was combined with the Texas Section of District VII of the American College of Obstetrics and Gynecology. This year of 1979 there was a postgraduate section on Gynecological Surgery which offered an excellent program.

FELLOWSHIP

Another primary function of the Association has been able to promote its fellowship. This increased over the years. At the parties and "get-togethers" it is extremely rewarding and satisfying to meet old friends, see new faces, and make new acquaintances. Since the Association is primarily educational in scope, there has been the avoidance, as much as possible, of overtones political in nature.

And last, but not least, tribute must be paid to the spouses of the members of the Association. Their help and assistance has made our meetings more delightful and enjoyable, not to mention more exhilarating.

The past 50 years has seen a tremendous advancement and progress in the practice, art, and science of the specialty of obstetrics and gynecology. The Texas Association of Obstetricians and Gynecologists has played a leading part in this progress of the past five decades. Under its leadership, teaching and education has excelled and the formation of the subspecialties, oncology, perinatology, neonatology and endocrinology, has been given impetus.

One can only imagine what the next fifty years may hold: Amniocentesis on the moon, uterine transplants, pills for men, victory over cancer, test tube babies, and a TAOG meeting on Mars.

PAST PRESIDENTS

1929-1930	Calvin R Hannah*	Dallas
1930-1931	Willard R Cooke*	Galveston
1931-1932	Robert A Johnston*	Houston
1932-1933	E W Bertner*	Houston
1933-1934	Elbert Dunlap*	Dallas
1934-1935	Ben Hill Passmore*	San Antonio
1935-1936	J L Jinkins, Sr*	Galveston
1936-1937	Herman W Johnson*	Houston
1937-1938	W L Parker*	Wichita Falls
1938-1939	J W Bourland, Sr*	Dallas
1939-1940	H Reid Robinson*	Galveston
1940-1941	Roy Lee Grogan*	Fort Worth
1941-1942	Minnie L Maffett*	Dallas
1942-1943	T F Bunkley*	Temple
1943-1944	Milton A Davison*	Marlin
1944-1945	Allen Stewart*	Lubbock
1945-1946	Allen L McMurrey*	Houston
1946-1947	J E Kanatser*	Wichita Falls
1947-1948	Warren W Massey*	Dallas
1948-1949	Julius McIver*	Dallas
1949-1950	G Herbert Beavers, Jr*	Fort Worth
1950-1951	Howard O Smith*	Marlin
1951-1952	S Foster Moore*	San Antonio
1952-1953	George F Adam*	Houston
1953-1954	D D Wall*	San Angelo
1954-1955	G F Goff*	Dallas
1955-1956	John J Delany*	Galveston
1956-1957	Carey Hiett*	Fort Worth
1957-1958	Arthur M Faris*	Houston
1958-1959	Jesson L Stowe*	El Paso
1959-1960	Maurice Meynier*	Houston
1960-1961	Oran V Prejean*	Dallas
1961-1962	Emerson K Blewett	Austin
1962-1963	Willis H Jondahl*	Harlingen
1963-1964	William P Devereux*	Dallas
1964-1965	John A Wall*	Houston
1965-1966	Hugh W Savage*	Fort Worth
1966-1967	Jack A Pritchard*	Dallas
1967-1968	Hiram P Arnold	Houston
1968-1969	James T Downs, III*	Dallas
1969-1970	Felix N Rutledge*	Houston
1970-1971	Charles W Braselton, Jr*	Fort Worth
1971-1972	Charles E Gibbs*	San Antonio
1972-1973	J L Jinkins, Jr	Galveston
1973-1974	William F McLean*	Austin
1974-1975	Wayne F Baden	Temple
1975-1976	William J McGanity	Galveston

1976-1977	Dennis M Voulgaris*	Wharton
1977-1978	Ted H Forsythe	Lubbock
1978-1979	James H Goodson*	Dallas
1979-1980	Georgia F Legett	Austin
1980-1981	William H Nash*	San Antonio
1981-1982	Alvin L LeBlanc	Galveston
1982-1983	Raymond H Kaufman	Houston
1983-1984	C Ken Landrum	McAllen
1984-1985	George B Coale, III	Houston
1985-1986	George H Sullivan	Fort Worth
1986-1987	Bob L Shull	Temple
1987-1988	Alvin L Brekken	Dallas
1988-1989	Robert H Wernecke	Austin
1989-1990	Daniel A Chester	McAllen
1990-1991	Dudley P Baker	Temple
1991-1992	Harry M Little, Jr*	Galveston
1992-1993	Harold J Miller	Houston
1993-1994	Joseph Sakakini, Jr*	El Paso
1994-1995	Dave W Kittrell	San Antonio
1995-1996	Peter K Norton	Abilene
1996-1997	Terrence Kuhlmann	Austin
1997-1998	Ralph Anderson	Fort Worth
1998-1999	Dennis Factor	Dallas
1999-2000	James Hadnott	San Antonio
2000-2001	William L Rayburn	College Station
2001-2002	G. Douglas Tatum, Jr	Fort Worth
2002-2003	Lisa M. Hollier	Houston
2003-2004	John C. Jennings	Galveston
2004-2005	Carl A. Dunn	Waco

* - deceased

HONORARY MEMBERS

(in alphabetical order)

Dr Eli Y. Adashi	Salt Lake City, UT
Dr William C Andrews	Norfolk, Virginia
Dr Axel Arneson	St. Louis, Missouri
Dr S Jan Behrman	Ann Arbor, Michigan
Dr Ralph C Benson	Portland, Oregon
Dr James Breen	Livingston, New Jersey
Dr John I Brewer.....	Chicago, Illinois
Dr John Buster	Torrance, California
Dr William T Carlisle	Chicago, Illinois
Dr David Carr	Hamilton, Ontario, Canada
Dr Robert Cefalo.....	Chapel Hill, North Carolina
Dr Herbert Chamberlain	Sacramento, California
Dr Frank A. Chervenak.....	New York, New York
Dr Steven L Clark	Salt Lake City, Utah

Dr William Creasman	Charleston, South Carolina
Dr Val Davajan	Los Angeles, California
Dr Ezra Davidson.....	Los Angeles, California
Dr Philip De Saia	Los Angeles, California
Dr Alan H DeCherney	Boston, Massachusetts
Dr Edwin J DeCosta.....	Chicago, Illinois
Sir John Dewhurst.....	London, England
Dr Preston V Dilts, Jr.....	Ann Arbor, Michigan
Dr A Louis Dippel	Houston, Texas
Dr Gordon W Douglas	New York, New York
Dr Isadore Dyer.....	New Orleans, Louisiana
Dr Nicholson J Eastman.....	Baltimore, Maryland
Dr Sherman Elias	Memphis, Tennessee
Dr Thomas N Evans.....	Detroit, Michigan
Dr James Fiorica	Tampa, Florida
Dr Stewart A Fish	Memphis, Tennessee
Dr Eduard G Friedrich	Gainesville, Florida
Dr Fredric D Frigoletto, Jr.	Boston, Massachusetts
Dr Steven Gabbe	Columbus, Ohio
Dr Harvey Gabert.....	New Orleans, Louisiana
Dr Rudolph P Galask	Iowa City, Iowa
Dr Donald G. Gallup.....	Savannah, Georgia
Dr Sprague Gardiner	Indianapolis, Indiana
Dr William E Gibbons	Houston, Texas
Dr Robert Goldenberg	Birmingham, Alabama
Dr Peter Grannum	New Haven, Connecticut
Dr J P Greenhill	Chicago, Illinois
Dr Ralph Hale	Washington, DC
Dr Charles B Hammond.....	Durham, North Carolina
Dr Arthur F Haney	Durham, North Carolina
Dr H. Benson Harer	San Bernadino, California
Dr William Hart	Ann Arbor, Michigan
Dr John Hauth.....	Birmingham, Alabama
Dr Walter L Herrmann.....	Seattle, Washington
Dr Arthur Hertig	Boston, Massachusetts
Dr Gary D Hodgen.....	Bethesda, Maryland
Dr C Paul Hodgkinson.....	Detroit, Michigan
Dr Richard F Hollis.....	Armory, Mississippi
Dr Fred M Howard.....	Rochester, New York
Dr Donald L Hutchinson.....	Pittsburgh, Pennsylvania
Dr Eric Jauniaux	London, England
Dr Carl T Javert	New York, New York
Dr Harry Jonas	Kansas City, Missouri
Dr Richard F Jones.....	Hartford, Connecticut
Dr Gerald F. Joseph Jr.	Ozark, Missouri
Dr Thomas H Kirschbaum.....	Bronx, New York
Dr Robert W Kistner.....	Brookline, Massachusetts
Dr Kermit E Krantz.....	Kansas City, Kansas
Dr Leo D Lagasse	Los Angeles, California

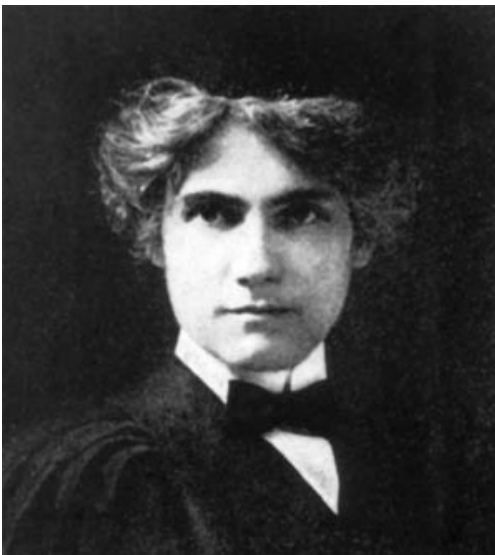
Dr Raymond Lee.....	Rochester, Minnesota
Dr John L Lewis, Jr.....	New York, New York
Dr Rogeria A Lobo	Los Angeles, California
Dr George Malkasian.....	Rochester, Minnesota
Dr Richard P Marrs.....	Santa Monica, California
Dr Daniel C Martin.....	Memphis, Tennessee
Dr James N. Martin.....	Jackson, Mississippi
Dr Byron J Masterson.....	Louisville, Kentucky
Dr Luigi Mastroianni, Jr.	Philadelphia, Pennsylvania
Dr Richard F Mattingly.....	Milwaukee, Wisconsin
Dr Paul McDonough.....	Augusta, Georgia
Dr William F Mengert.....	Chicago, Illinois
Dr Frank C. Miller.....	Lexington, Kentucky
Dr Norman Miller.....	Ann Arbor, Michigan
Dr George Mitchell, Jr.	Boston, Massachusetts
Dr George Morley.....	Ann Arbor, Michigan
Dr Charles P Morrow.....	Los Angeles, California
Dr Evan R. Myers.....	Durham, North Carolina
Dr David H Nichols.....	Buffalo, New York
Dr Jennifer Niebyl.....	Iowa City, Iowa
Dr Mary Jo O'Sullivan.....	Miami, Florida
Dr Robert Park.....	Washington, D.C.
Dr Martin L Pernoll.....	New Orleans, Louisiana
Dr R J Pieri.....	Syracuse, New York
Dr M Steven Piver.....	Buffalo, New York
Dr Joseph H Pratt.....	Rochester, Minnesota
Dr Harry Prystowsky.....	Gainesville, Florida
Dr John T Queenan.....	Washington, D.C.
Dr Ralph Richart.....	New York, New York
Dr Daniel H Riddick.....	Farmington, Connecticut
Dr Daniel K Roberts.....	Wichita, Kansas
Dr John A Rock.....	Baltimore, Maryland
Dr John Rock.....	Boston, Massachusetts
Dr Roberto Romero.....	Detroit, MI
Dr Griff T Ross.....	Bethesda, Maryland
Dr Felix Rutledge.....	Houston, Texas
Dr Kenneth J Ryan.....	Cleveland, Ohio
Dr Joseph G Schenker.....	Jerusalem, Israel
Dr Jan Schneider.....	Philadelphia, Pennsylvania
Dr Robert K Seymour.....	Montreal, Canada
Dr Joe Leigh Simpson.....	Chicago, Illinois
Dr Al Singer.....	London, England
Dr Fred Smith.....	US Navy
Dr Bradley E Smith.....	Nashville, Tennessee
Dr William N Spellacy.....	Chicago, Illinois
Dr Thomas Stovall.....	Winston-Salem, North Carolina
Dr Richard Sweet.....	San Francisco, California
Dr Leon Tancer.....	New York, New York
Dr E Stewart Taylor.....	Denver, Colorado

Dr Richard W Te LindeBaltimore, Maryland
Dr Henry A ThiedeJackson, Mississippi
Dr Fred SmithUS Navy
Dr Paul Tomich.....Maywood, Illinois
Dr James C Warren.....St. Louis, Missouri
Dr James D WoodruffBaltimore, Maryland
Dr Samuel S C Yen.....La Jolla, California
Dr Jim Youngblood.....Kansas City, Missouri
Dr Fredrick Zuspan.....Columbus, Ohio



HANNAH, CALVIN RICHARDS (1872-1940). Calvin R. Hannah, born on May 2, 1872, in Chrisman, Illinois. He was one of the youngest children in a large farming family. He attended Chrisman High School, De Paul University, and the University of Illinois, and graduated on July 5, 1904, from the Illinois College of Medicine. That year Hannah went to Mexico to serve as an intern at the American Hospital; he was later assistant surgeon of the Mexican Central Railroad at Aguascalientes. In 1905 he moved to Dallas, Texas, where he set up a private practice and became assistant city health officer. In 1907 Hannah began a long association with Baylor Hospital when he became its obstetrician in chief. The following year he became a member of the advisory board of the hospital and a professor of obstetrics at Baylor University College of Medicine (now Baylor College of Medicine). He also served as chief of staff and a member of the advisory board for Parkland Hospital from 1918 to 1920 and again from 1922 to 1935. Throughout his career he maintained a private practice, for a time in partnership with Warren E. Massey. During the decade preceding his death, Hannah's office was in the Medical Arts Building at the corner of Pacific and St. Paul streets.

He was elected president of the Dallas County Medical Society in 1914. He was the organizer and first president of the Texas Association of Obstetricians and Gynecologists in 1930 and was appointed that year by President Hoover to the White House Conference on Child Health and Protection. Hannah served as chairman in 1935-36 of the Commission on Maternal and Child Health in Texas and was a charter member and vice president in 1936-37 of the American Association of Obstetricians, Gynecologists, and Abdominal Surgeons. He was a member of the Texas Medical Association and served as its president elect in 1936-37 and as president in 1937-38. Other professional organizations to which Hannah belonged included the American Medical Association, the Dallas Southern Clinical Society, the American College of Surgeons, and the Theta Kappa Psi medical fraternity. Hannah published over two dozen papers in local and national medical journals. They deal with the problems of childbirth, recommendations for prenatal and postnatal care, and the broader issues of medical ethics and education. As an obstetrician and gynecologist, he was chiefly concerned that the medical profession was focusing too heavily on surgical solutions rather than basic nutrition and prophylaxis. A colleague asserted that "his greatest usefulness in the field of gynecology was in preventing needless operations." Medicine, as Hannah saw it, was a team effort. He believed that if doctors joined to promote better education, both of the public and of medical students, the rewards would be material as well as moral. He saw socialized medicine as a threat to the profession and argued that physicians must address the broader needs of public health lest the government step in. Peer pressure, he believed, should be used to get recent medical graduates to set up practice in rural areas and to get small communities to build hospitals and share the use of expensive equipment. December 16, 1940, he suffered a heart attack and died in Dallas at Baylor Hospital.



MAFFETT, MINNIE LEE (1882-1964). Minnie Lee Maffett, physician and surgeon, was born in Falls County, Texas, on September 9, 1882. After attending public schools in Falls County, she graduated in 1902 from Sam Houston State Teachers College (now Sam Houston State University). While working on this degree she taught in public schools, and in 1906 she became principal of a ward school in Cleburne. From 1907 to 1910 she served as principal at the State Orphan Home High School in Corsicana. Maffett graduated from the University of Texas Medical Branch in Galveston in 1914. After an internship at the New York Infirmary for Women and Children, she established a practice as an abdominal surgeon in Dallas in 1915. She opened the health center at Southern Methodist University in 1915 and oversaw its growth to recognition by the American Medical Association; she resigned as its director in 1949. From 1926 to 1943 she served as associate professor of gynecology and obstetrics at Baylor University College of Medicine in Dallas. When the Baylor facility moved to Houston in 1943, Dr. Maffett became professor of clinical gynecology at the Southwestern Medical Foundation in Dallas (now part of the University of Texas Southwestern Medical Center at

Dallas). She later was a consultant in gynecology at Southwestern. She served on the staffs of several Dallas-area hospitals, including Baylor, Parkland, and Medical Arts. She completed postgraduate work at the University of Chicago, additional training in urology at Johns Hopkins University in Baltimore, and studies at the New York Post Graduate Hospital.

Maffett served in 1919-20 as the first president of the Texas Federation of Business and Professional Women's Clubs and later (1939-44) became president of its national affiliate. Through the federation a fellowship named for Maffett was established in the 1950s to award grants to women for study in medical science. Other groups in which she was active included the American Medical Association, Southern Medical Association, Texas Medical Association, Texas Association of Obstetricians and Gynecologists, American Medical Women's Association, American College of Surgeons, and Dallas County Medical Society. Maffett also was a member of Delta Kappa Gamma, a professional organization for women teachers, and the University Women's Club of Southern Methodist University.

During World War II she served on the National Civilian Advisory Committee to the War Department, chairing the subcommittee that studied health and recreation in the Women's Army Corps. In 1951 she was appointed to a panel by the State Department to study women's clubs in West Germany. She served as an advisor for health workshops for the Pan Pacific and Southeast Asian Women's Association in Japan and for the International Federation of Business and Professional Women's Clubs in South Africa. Her primary international interest, however, was China. Maffett was a member of the Chinese Relief Region and the board of directors of the American Bureau for Medical Aid to China, when she led the national Federation of Business and Professional Women's Clubs to assist Chinese nurses in 1941. The financial-aid program to improve educational opportunities and facilities available for Chinese nurses assisted nurses in mainland China through 1949 and nurses in Taiwan after 1950. In 1964 a nurses' and students' residence, for which the FBPWC raised more than \$100,000, was constructed at the National Defense Medical Center in Taipei, Taiwan, and named for Minnie Maffett. She also received the rosette of the Order of the Brilliant Star of the Free Chinese government. She attended dedication ceremonies for the new facility bearing her name in Taiwan on April 15, 1964. While returning from Taiwan she became ill and died in Honolulu, Hawaii, on May 26, 1964.



J. L. JINKINS, SR. a native of Normangee. He received his doctorate of medicine in 1916 at UTMB and practiced for over 60 years. Was Clinical Associate Professor in the Department of Obstetrics and Gynecology at the Medical Branch. His memberships included the Central Association of Obstetrics and Gynecology, Fellow of the American College of Surgeons and the American Society for the Study of Sterility. In 1936 he organized a Sterility Clinic for the Department of Obstetrics and Gynecology which he equipped at his own expense. Historically, it is revealed that this clinic was the second such to be founded in the United States