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The following is a program called Medical News and Views recorded for radio station WFAB by Dr. Chris King and featuring Dr. J. Fred Lembright. This was recorded November 11, 1973. A 155 588/w

REMINISCENCES

OF

DR. J. FRED LEMBRIGHT

Lembright, J. Fred

Interview by
Dr. Christopher M. King
November 11, 1973

Prepared by the Rodman Public Library
for the Oral History Project, Alliance, Ohio.

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Medical News and Views is on the air.
MUSIC....

Welcome to Medical News and Views. A program about medicine in the Alliance area. Presented by the staff of Alliance City Hospital in cooperation with station WFAH and WFAH FM. Now here is your moderator Dr. Chris King.

KING: Thank you Tony, hello and how do you do and welcome once again to Medical News and Views. Medicine and Medical News and Views are in the habit of looking forward. Looking forward to new advances in medicine, looking forward to new techniques, new gadgets, new things to make our lives healthier and our lives longer. Today on Medical News and Views we're going to spend a little time looking backward. And on Tuesday of this week Dr. J. Fred Lembright will be honored by the members of the Alliance City Hospital staff at a dinner in honor of his retirement from practice. Which incidentally occurred almost one year ago but it has not been possible to have this honorary party. Therefore Medical News and Views today will devote itself to a discussion with Fred Lembright of some of the things that he has seen take place

in medicine over the past thirty or forty years that he's been associated with it. Fred I'd like to welcome you to Medical News and Views today.

LEMBRIGHT: Thank you Dr. Chris, I'm glad to be here.

KING: Dr. Lembright you graduated from John Hopkins University with your M.D. degree in 1935 and did some obstetrics and gynecology training at John Hopkins and then moved on to Boston to Massachusetts Memorial Hospital for two and a half years and then moved to Clarksburg, West Virginia. You were there for ten years from 1938 to 1948. At that point the lure of your home town where you were born brought you back in 1948 and you have been in Alliance since then. Some of us who are a little older than our younger group of audience will remember the old Lembright Bakery, down on Market Street if I remember correctly.

LEMBRIGHT: Yeah.

KING: And your father of course was the founder and long time President of that fine bakery. Well Fred it's really a pleasure to welcome you to Medical News and Views and to have you share with us some of the things that you see in retrospect and as we grow toward the end of the program that you see perhaps changing in medicine over the past few years. I think one of the things that really concerns many of us who are in medicine and have been in medicine for maybe ten or fifteen years is that it is a vastly different ball game so to speak or a vastly different way of doing

business than it was when you started in practice. How would you characterize some of the differences in medicine Fred?

LEMBRIGHT: I would think that the individual practitioner of medicine of twenty-five to thirty years ago was more of an individualist and perhaps a purveyor of services in his own personal right, as compared to a tendency today toward a sharing of the medical care responsibility with patients which sub tends group type practice or clinic type practice.

KING: Do you think this is a good thing, a bad thing, or just something different?

LEMBRIGHT: Well I think in the long run it should be good providing the services rendered are adequate to cover the situations without using undue time or elevating the expense too highly.

KING: When you came back here to practice in 1948 at Alliance what would a typical working day for you be like in brief? And how would it differ from let's say one and a half years ago before you closed your office?

LEMBRIGHT: Well of course I have limited my work primarily to general surgery and so the change has not been as radical perhaps in this twenty-five years. I have also done industrial surgery with the American Steel Foundries for almost twenty-five years. And the typical working day was usually to report to the American Steel Foundries at 7:00 in the morning for an hour to an hour and a half of work and then

to transfer my attentions to City Hospital where the next two to three hours most every morning were devoted to general surgical procedures and following that an attempt to make ward rounds and consult on my patients and do dressings and order and attempt to get to the office by 2:00 if possible.

KING: That makes for a tight morning.

LEMBRIGHT: And from there on it was office consultations until 6:00 in the evening and for the first few years of my practice it was back in again in the evening at 7:00 for evening office hours up until 9:30 or 10:00. At least three nights a week.

KING: This is certainly a vastly different thing from which, in the situation of which most of us find ourselves today. Evening office hours are almost completely a thing of the past. And house calls of course have become less and less common through out the years. Any comparison between your house call routine twenty years ago and a year and a half ago?

LEMBRIGHT: Yes, as a matter of fact a year and a half ago I made only an occasional house call. Mostly on some patient who couldn't get their doctor or a doctor and it sounded like they shouldn't be moved or some of my own patients who sounded too ill to be moved to the office or some other place. While prior to that time at the beginning of my practice, one made usually an average of three to four house calls a day worked in sometime in the late afternoon or evening.

KING: Uh huh, this of course is an example of different ways of delivering the product that we doctors or I should say the government has chosen to call a product now, health care as a service. There are some other interesting changes that have taken place; an increasing use of the emergency room. Do you have any thoughts as to what might have contributed to this?

LEMBRIGHT: Well I think there was several features that may have brought about increase use of the emergency room. Number one, sometimes it is more convenient for a family or a patient to be seen in the emergency room because it works in better with the family routine, particularly if both parents work, and the mother doesn't get home until 5 or 6:00 in the evening. Number two, I think they feel that they can get quicker service in some cases without having to wait so long as they may have had to wait in our offices of twenty-five years ago. Number three, I think there are any number of people who use the emergency room facilities because it comes under the insurance program which is carried for them by their employer or some other group. Number five I think the feeling of being able to see any one of several doctors that may be indicated lead some people to go to the emergency room and also to receive medication if necessary.

KING: Do you think that the change toward group practice, toward groups doing the practice of medicine together and seeing each others patients and this sort of thing is a good thing or a bad thing or not necessarily either one and do you think it says something about the way America

has evolved?

LEMBRIGHT: Well I think basically the group practice should be better. It depends somewhat on the individual physicians that's in the group and their feeling of compassion and allegiance to the patient of the group. In some areas I think groups operate almost like the dispensaries of big city hospitals used to, where the patient was more or less a number, he was seen and sent out and tomorrow somebody else would be here to cover. But I think in a good group, and I say good meaning a compassionate, interested group, each member feels that the patient is an individual and a member of their organization and therefore devotes his best interest to him.

KING: Dr. Lembright, do you feel that young physicians who are coming out today and going into practice either in general practice or family practice or into general surgery are doing the kinds of things that you used to do that you waded into so to speak when you went to Clarksburg, West Virginia in 1938?

LEMBRIGHT: No, I don't feel that they are because the tendency has been in to practicing a good medicine for each individual to become more and more interested in a smaller number of disease treatments and therefore to limit his interest and practice to only that particular group of sicknesses. While the older general doctor and general surgeon was able to handle a more diversified group of individual illnesses.

KING: Uh huh.
in surgery. But you've taken on a well earned retirement
Dr. Lembright. And the Alliance City Hospital staff certainly

LEMBRIGHT: Perhaps in some cases not as efficiently and as well but as compared to the nobs of the time I think generally and over all quite well.

KING: Do you think that medicine is going in the direction of taking care of more people better or do you think we're sliding backwards with regard to this?

LEMBRIGHT: I think we're at a crossroads. As you think about it there are many so called self delivery care types of care at least being tried out experimentally in the country today. Some of them depend entirely upon medical doctors to give the services. In some of them there is a tendency to use non-medical but trained personnel to do a lot of the basic work and opinions and judgement only to be given by the medical personnel. In this respect I think perhaps where too much emphasis is placed on non-medical personnel there may be a slippage in the kind of care that's given.

KING: Uh huh. So I think we as physicians and the patients as people or consumers as the government and the insurance agency would like to talk to them, or refer to them, certainly have some very important decisions to make over the next few years. The most important decision, one of the most important decisions that you made was to stop your routine medical practice as of December 1, 1972. We miss you in Alliance. I have talked to many, many, many patients who miss the fact that you're no longer in practice. We certainly miss your presence at the staff meeting and we miss your presence in surgery. But you've taken on a well earned retirement Dr. Lembright. And the Alliance City Hospital staff certainly

honors you with all its heart for contributing a tremendous amount to the progress of health care in the city of Alliance and probably also Clarksburg, West Virginia, over the last number of years. And we appreciate what you have done for Alliance.

LEMBRIGHT: Well Dr. Christopher King, I thank you very much, this has been a pleasure for me and an unexpected pleasure. I hope I have been able to change the color of things just slightly in my passing.

KING: You have indeed. And Dr. Fred Lembright we appreciate your appearing on Medial News and Views and this is your host for Medical News and Views Dr. Chris King.

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You have been listening to Medical News and Views, a weekly program about medicine in Alliance, presented by the Alliance City Hosptial staff and this station as a public service.

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