Editorials

Norman Goldstein MD
Editor, Hawaii Medical Journal

Hawaii Medical Journal Joins the Web

Tables of contents for Hawaii Medical Journal were recently made accessible via the internet, thanks to efforts of the Mamiya Medical Heritage Center staff. Listings for issues from volume one (1941) through volume 20 (1961) are archived on the site, as are issues from 1999 and 2000. Mamiya Medical Heritage Center staff is currently working to put tables of contents from 1961 through 1998 in HTML format, and will post them as they are completed.

Users can browse the tables of contents by issue, and the site also offers a search function. For contributions to the Journal, an Author Instruction link is available, as well as Contact Information.

To access the Journal, click the Mamiya Medical Heritage Center link on the HML homepage (http://hml.org), then click Hawaii Medical Journal.

Mahalo to John Breinich, Executive Director of the Library, and the staff of the Mamiya Medical Heritage Center for getting the Journal on the Web.

This Month’s Manuscripts

This month, we end manuscripts for the year 2000 with “End-of-Life Preferences in Hawaii” and “Differing Attitudes between Psychiatrists and Primary Care Providers at the Interface.”

The name of Kathryn Braun should be familiar to readers of the Journal. She first reported on Cultural Issues in Death and Dying in 1996, and in 1998 compared five ethnic groups in her manuscript “Do Hawaii Residents Support Physician-Assisted Death?” Kathryn was also a very active member of Ah Quon McElrath’s ad hoc committee on Living and Dying in Hawaii.

In this manuscript, based on telephone interviews with more than 2,000 individuals, she and her associates found that Hawaii residents are very similar to mainland residents, especially in their preferences for dying at home, seeking hospice care, and support for legalization of aid-in-dying. Kathryn and associates emphasize, “As public attention and consumer awareness about end-of-life issues increase, it is imperative that healthcare systems must encourage physicians and patients to discuss options and preferences.”

The second manuscript in December’s Journal was suggested by several physicians. Two additional references were recommended. The first is “Difficulties in Integration of Psychological and Medical Practices” by Herbert N. Brown MD and Norman E. Zinberg MD. In a follow-up Letter to the Editor, these authors suggest that “medical teachers must be aware of and convey to their students the limits of individual capacity.”

References

Aloha, Becky Kendro

Becky Kendro has been affiliated with the Hawaii Medical Association since 1967 when politicians knew her as the Director of Government and Legislative Affairs. Working with the HMA’s Legislative Committee of Physicians, Becky represented us at meetings and hearings.

She helped to develop the Hawaii Relative Value Studies, a coding system which was the predecessor of the CPT and other systems currently used today. Becky coordinated the programs of Continuing Medical Education in conjunction with the Regional Medical Program in 1968 when there was no School of Medicine, and when physicians had to rely on visiting professors for their continuing education. She was the HMA liaison with many agencies including MADD, The Medicine Bank, Community Health Centers, and Coders.

Becky’s official title was Assistant Executive Director, Community Affairs, but she has worn many hats. As Managing Editor of the HJ, income and size have doubled during the past five years.

Becky has recently taken “early retirement” for the Hawaii Medical Association. I’m not really sure what that means, but knowing Becky, we’re certain that she’ll not be sitting around the rocking chair.

Becky, your extended HMA family wishes you all the best with a heartfelt “mahalo nui loa”.

Healing thyself:
Medical professionals who face up to addictions

By Beverly Creamer
Advertiser Staff Writer

It’s 7 p.m. on a weekday evening as Dr. S. Larry Schlesinger closes the door of a Wailuku, Maui, office and begins an unusual meeting with the physicians gathered inside. They’re not discussing patients or procedures. These doctors are discussing themselves, and why they have abused alcohol or drugs.

It’s part of Larry Schlesinger’s own recovery, and part of his commitment to other doctors who suffer from the same secret disease he had.

“There was no organized way of helping physicians at the time, so I signed myself into treatment,” he says of the day in 1983 when he acknowledged his addiction to tranquilizers and alcohol. “Now I work in a lot of ways to help impaired professionals so they don’t have to flounder as I did at the beginning.”