

Area doctor leads comeback in family practice

(Continued from Page 1A) bred doctors and folk medicine practitioners to work together and learn each other's ways, the medical practices of the country are a hybrid of the two.

Instead of replacing herbal medicine and acupuncture with totally modern techniques, the Chinese have combined the two and have begun to study the reason some of the old ways work.

THAT SORT OF research has been done in the U.S. for some time, but the distance the Chinese have taken the state of their medicine has impressed Hess.

"Their surgery is done delicately and artistically," he said.

And non-toxic treatment, such as massage is used by the Chinese to a larger degree than in the U.S., according to Hess.

But it's the way in which the Chinese use their social and support patients through medical and emotional crisis which impresses Hess. They rely so heavily on their tradition because it's common to all Chinese in contrast to the various traditions and ethnic groups of the much younger U.S., Hess said.

The reliance on the family situation of the patient is something that can be found in Hess' own field. Doctors are trained in behavioral and social problems as well as medical ones.

The philosophy espoused by family medicine stresses that medical problems aren't isolated from the family and business life of the patient.

Stress in everyday life can aggravate such problems as high blood pressure, diabetes, back aches and headaches.

PERSONS facing medical problems

often turn to specialists they pick out of the Yellow Pages.

Hess points out there is a tendency by the public to overuse specialists.

"Specialty medicine is expensive. Many specialists do a lot of testing and evaluations that are not necessary but it's their stock in trade," he said.

"They have to justify their existence. That's (specialized) their thing."

Doctors who practice family medicine refer patients to specialists when they can't provide treatment on their own or when their diagnosis needs to be specially tested.

Specialists should be used judiciously, Hess said. Special testing, including x-rays should also be used carefully.

He prefers family doctors to examine and diagnose using their basic skills and senses without automatically ruling out testing.

The same approach applies to hospitals, according to Hess.

"Hospitals are overused," he said.

"The insurance system wouldn't reimburse as much for out-patient treatment. Many times, patients pressure the physician to put them into the hospital so their insurance could help pay the bill.

THERE ARE economic disincentives for patients to be treated in out-patient facilities," he said.

"Some doctors would rather have a patient in the hospital for testing. It's easier for the patient and less complicated for the doctor.

"Instead of doing a series of tests which might take three weeks if the patient came in at his convenience, the series could take three or four days and the patient can leave the hospital," Hess said.

More time needed to study hospital cost-cutting measures

By SANDRA ARMBRUSTER

A revised plan to reduce excess hospital beds in southeastern Michigan and a plea for more time to implement the plan is the goal of area hospital representatives.

First to suggest the moratorium or time extension at a public hearing Friday was Dr. James Fryfogle, a former member of the so-called debedding commission and chairman of the seven-county Comprehensive Health Planning Commission (CHPC), which advises the CHPC.

"I want you to use your influence to stop the clock," Fryfogle told the commission. "As it is today, it (the plan) is a mess."

The plan is mandated by a state act which calls for a reduction in hospital beds to hold down the rising cost of health care. Deadline is March 31 for the CHPC of Southeast Michigan, which is responsible for developing the plan, to submit it to the state.

CHPC's board of directors will vote on suggested revisions to the original plan on March 26 (see chart). The plan originally was submitted to the state last December. The CHPC was allowed a time extension to revise the plan, however, after outraged health care providers and consumers protested the plan at a public hearing earlier that month.

NOW COMMENTS from Friday's public hearing on the revised plan are expected to prompt a request for another time extension, a moratorium or a repeal of the state act itself.

In calling for the moratorium, Fryfogle said that the only purpose of his group is to "stop the CHPC." He said that doctors in his group object to the plan, and he warned that the Michigan State Medical Society is about to take action opposing the plan. That would place representatives of all physicians in the state on record in opposition to the plan.

Fryfogle called the plan inadequate and inequitable.

"I'm talking as a planner. I'm distressed because I think of how hard the CHPC has worked. . . I shudder when I think that you have to push this plan under a time gun when everyone is against it," he explained.

"I propose an alternate. This (moratorium) gets CHPC out from under the gun when it has only two weeks left," he continued. "I want the aroused community to make a regional plan.

"There's no question everyone is talking about it. Now we can logically come up with a plan," he said.

Agreeing with the need for more time is Della Goodwin, president of the CHPC.

"If we just had more time — I feel the need and I believe the Legislature believes we need more time," said Ms. Goodwin. "It's unfortunate that we are in a mid-stream. We are a long way from a mutual understanding."

"I would stop short of a moratorium," she cautioned. "The time could get to be lengthy and go on without ever reducing beds."

Ms. Goodwin said she thinks the CHPC has "shown sufficient progress" in making changes in the plan during the last six weeks that would justify an extension.

"More time would allow us to benefit from what we've learned, as we've learned a lot about planning," she added.

"I still believe it's necessary to reduce beds, but I'm convinced that we need to take another look at what criteria should be used to evaluate hospitals," Ms. Goodwin said. "The commission has heard things that it's had no time to contemplate.

Also calling for a time extension was Dr. George Gerber, who said he represented the Oakland Medical Society and the Michigan Society of Obstetricians and Gynecologists at the hearing.

"More time is needed. You should ask for an extension. It would be supported by our physicians," said Dr. Gerber. "Excess beds exist. That can hardly be argued against; however, we do not support the plan."

Dr. Gerber criticized the plan for "shifting occupancy to the larger medical center hospitals" and urged a further study of hospital costs.

SPAKING ON behalf of Providence and Straith hospitals was Maria Ward, community development coordinator for Southfield. Ms. Ward said she represented both the mayor and city council of Southfield.

"To penalize these two is limiting the amount of care that can be provided," Ms. Ward said.

She described Southfield as the geographic center of the metropolitan area with more than half a million people employed there and a resident population expected to grow to 120,000 by 1990.

"The city council has passed a resolution opposing the plan as harmful to

Southfield, and the chamber of commerce president, Brian Jakes, also was expected to speak on behalf of Providence.

"This plan will have a devastating effect on the alliance between Providence and the city," she said. "In 1972 we were pioneers in emergency medical care and now we're being penalized for those services."

Frank Brock, director of planning for Providence, criticized the "systems approach" of the plan because it doesn't replace lost services with a "needed increase in other programs such as long-term, ambulatory and home care.

Brock said he also objected to the plan because the rating system "doesn't recognize historical, voluntary efforts for cost reduction," because multi-hospital organizations are "penalized," and because standards aren't compiled consistently.

Dr. Richard Straith said that the cost of closing beds in his plastic and reconstructive surgical hospital would amount to \$665,000 in five years. He said he had tried to merge with 15 hospitals before he built his own, but he was unable to get access to even one operating room.

He urged that hospitals be given the "right of appeal and due process" and be reevaluated in the ranking scale as they comply with standards set.

IN SUPPORTING the revised plan, Paul Hubbard, vice-president of New Detroit Inc., said the revisions "go along way to meet" community concerns. He also called for a commitment from hospitals and their staffs to make the plan work, for a cross-section of community leadership in plan for consolidation, and a pledge from CHPC that "all pieces are in place" before hospitals are closed or consolidated.

Objections to debedding were voiced by Dr. Martin Rosenfeld, chairman of the Michigan Association of Community Hospitals, and by Tom Luchi, who represented the Detroit Medical Society. In calling for "thoughtful revisions to the plan," Luchi said asking hospitals to cut beds is like telling car makers to "eliminate back seats to ensure a decline in pregnancies."

Dr. Rosenfeld said increasing health care costs were caused by increased demand from users.

Here's revised plan

A special commission has been charged with developing a plan to stem the rising cost of health care by reducing the number of excess beds in area hospitals.

In developing that plan, the debedding commission divided the southeastern Michigan area in regional sub-areas. Hospitals in those areas were ranked under a controversial scale and placed in one of three groups, with one being the lowest and three the highest in meeting guidelines on the scale.

The following chart shows how hospitals in the area you live were ranked. The chart shows the group in which they were placed, their occupancy rates, an adjusted bed capacity after "excess" beds are eliminated, the percentage of beds to be eliminated from current capacity and the corresponding number of beds to be eliminated.

Hospital	Grp.	Occ. Rate	Cap.	Reduction required	
				% Beds	Beds
Botsford	II	88	308	4.38	14
Plymouth General	I	85	146	4.0	58
Providence	II	99	430	4.4	19
Redford Community	II	95	72	4.4	3
Sinai	III	98	570	2.9	18
Straith	I	61	45	40.0	18
Beaumont-Royal Oak	III	92	880	2.9	25
Beaumont-Troy	II	63	200	4.4	9

Irish are ready—that's no blarney

(Continued from Page 1A)

provide live entertainment at the Village Inn with ballads, jigs and Irish Republican Army battle songs.

The philosophy espoused by family medicine stresses that medical problems aren't isolated from the family and business life of the patient.

Entertainment begins at 2 p.m. and bagpipers and young Irish step dancers round out the offerings.

"I expect a full house so come early," Cowley said.

For a more sedate way of marking St. Patrick's feast day, Farmer John's Greenhouse, 28585 Haggerty, is offering shamrock plants for 99 cents and \$2.99.

THE INSIDE * ANGLE

O'ANGLES WISHES everyone Happy St. Patrick's Day. And it goes without saying that an O'Angles salute will follow: ♦♦♦♦♦♦♦♦♦♦

oak Hill Nursing Home residents pulled together recently to raise \$416 for the Michigan Heart Fund. Residents created hand-crafted items, sold refreshments and operated different games. A special tip of the square Angles' topper to Valentina Fritz, who didn't let the fact that she's bedridden prevent her from contributing to the event by making dozens of yarn poodles, which were later sold.

COMING THIS SUMMER: Duck Wars, the story of subdivisions and apartment complexes along Grand River near Haledell, and how residents were divided in their attitude for the little ducks who inhabited the local pond. As you know, one bank in the area has a duck crossing sign facing motorists along Grand River. But some residents of the subdivision behind the apartment complex in that area are sometimes tempted to speed up rather than slow down when they see those little ducks waddle across the road. It seems they think the ducks make it difficult to keep the neighborhood clean. (You might say they wished all the ducky deposits were strictly bank transactions.)

APPLICATIONS FOR the Farmington Musicales 12th annual scholarship competition are available for students in grades seven through 12.

Applicants must attend a parochial school in Farmington or Farmington Hills. Children of Musicales members are eligible. Applications can be obtained by calling Fern Barber at 661-4604 or Lois Swanson at 538-2871. Hurry, deadline is April 5.

The competition will begin at 3 p.m. April 18 in Harrison High School's Music Suite. Scholarships will be awarded in piano, voice and instrument as individual categories for both senior and junior high musicians. First-place award for senior high musicians will be \$125. For junior high the award will be \$75.

STATE SENATOR Doug Ross, D-Oak Park, will speak on nuclear accidents and their prevention at 8 p.m. March 20 in Schoolcraft College's Liberal Arts Theater. The speech is sponsored by the League of Women Voters of Livonia, West Bloomfield-Farmington Area and Northville-Plymouth-Canton-Novi. The public is invited.

THE FARMINGTON HILLS Fire Department has openings for pull-callback fire fighters at Station 1, 28335 Middlebelt. The department is interested in filling a limited number

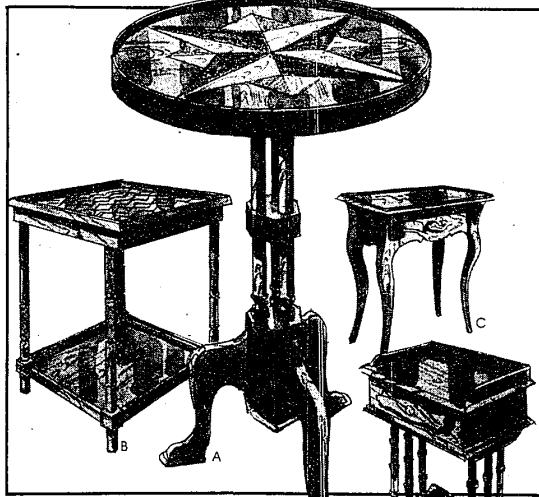
of positions as paid-callback fire fighters and in establishing an applicant list for future vacancies. They are looking for men and women between 18 and 40 years old who live close to the fire station between Orchard Lake and Inker roads and 14 and 10 Mile. Compensation for the job includes: \$8 an hour when responding to alarms; \$5.50 an hour while on standby; \$4 an hour for drill and training.

Benefits include injury insurance and a personal accident policy. Fire fighters are furnished with equipment: fire coat, helmet, boots, gloves and one dress uniform. To apply, write to Farmington Hills Fire Department Headquarters, 28711 Drake, Farmington Hills 48018.

ON MARCH 22-23, Farmington Hills will host 120 students participating in the Michigan Future Problem Solving Bowl. The tournament will include a variety of special activities for students and adults in addition to the actual problem solving competition. Throughout the school year teams of four students in grades four through 12 worked on practice problems involving futuristic dilemmas such as energy, undersea farming, space colonization or transportation. For the bowl, students will be given fuzzy situations involving the topic of the competition, hypnosis. Winners from each division in the state bowl will be asked to represent Michigan at the National Future Problem Solving Bowl on April 30 to May 3 in Lincoln, Neb.

A REAL BIG Farmington Community Band thank you goes out to the persons who supported the group at their "All-Sport and Variety Show." Athletes, performers, advertisers and patrons get a big Community Band thank-you kiss from their help. And Angles wants to salute the band and its patrons with the traditional IA symbolic cymbals: COCRRRRAAAAACCCSSSSHHHHHHH.

SO YOU WANT to win a blue ribbon at the Michigan State Fair? Expert advice on how to achieve just that will be given at a free seminar Wednesday at the State Fairgrounds Community Building on Woodward, south of Eight Mile in Detroit. At 10 a.m. Arnold, consumers marketing agent, MSU Extension Service, will lecture and demonstrate proper procedures in canning; 11:30 a.m., Betty Jo Steinman, a cake decorating instructor, and Lee Murray from the American Dairy Council will speak about baking entries; 1:15 p.m., Phyllis Ashinger, W.S.U. and Sarah Moore, E.M.U., will lecture on sewing techniques; 2:30 p.m., Lola Chotnicki on quilting, Millie Machuga on crafts, Margaret McCormick, embroidery, Agnes Miller, dolls, Anita Rowland, quilting and crocheting. For further information, call Leona Dudzinski at 368-1000.



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Browse through our gallery table collection. Select one for yourself or as a gift. Each with fine Italian craftsmanship combined with exquisite walnut veneers. Beauty to be enjoyed forever. We've even turned the tables on the prices. All are on sale. A round cigarette table with star inlay, 40 units, or B. two-shelf bunch tables, 80 units, reg. \$89, sale \$79 each. C. Louis XV table with poplar top; D. book table, 20 units' each, reg. \$179, sale \$159 each. E. bookstand, F. Vitreone table, 20 units' each, reg. \$139, sale \$119 each. Fine Furniture Imports.

*Units available while quantities last.

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