

# Plastic Surgeons

## Elect Memphian

### Southeastern Unit Names Dr. DeMere President

Dr. McCarthy DeMere of Memphis was named president of the Southeastern Society of Plastic and Reconstructive Surgeons yesterday at the Peabody. He will take office in 1964.

Assistant professor in the section of plastic surgery at the University of Tennessee College of Medicine, Dr. DeMere is a fellow of both the American and International College of Surgeons. He is president of Law-Science Academy of America.

Other professional affiliations include the American Board of Surgery, American Board of Plastic Surgery and American Society of Plastic and Reconstructive Surgeons.

During World War II, Dr. DeMere was chief consultant in plastic surgery for the Army of Occupation in the European Theater.

Dr. DeMere is on the active staff of local private hospitals and is consultant for the United States Public Health Service Hospital. He is a past Tennessee governor of Sertoma International.

Dr. Samuel E. Upchurch of Birmingham, Ala., assumed the presidency of the Southeastern Society, succeeding Dr. Clifford C. Snyder of Miami, Florida.



Dr. McCarthy DeMere

### Tanganyika Aids Fund

LLAR, Es Salem, June 14.—(AP)—The Tanganyika government has donated \$84,000 as its initial share of the special African Liberation Fund to give aid to non-independent African countries.

# Rehabilitation Plan Works Among Hand-Injury Patients

By IDA CLEMENS

An experiment in rehabilitation of patients who have suffered hand injuries in industry is proving an "excellent investment," a noted surgeon said yesterday.

Dr. Erle E. Peacock Jr., associate professor of surgery at the University of North Carolina in Chapel Hill, described the program before the Southeastern Society of Plastic and Reconstructive Surgeons at the Peabody.

"Our patients come from a great distance. They cannot remain long enough in the hospital at an average cost of \$35 a day to realize best results from surgery of the hand. The problem is further complicated by industrial compensation. The patient is paid not to work."

"When he goes home, much of the incentive on his part to regain motion of his hand is lost. His deformity becomes his identity," Dr. Peacock said.

To meet the problem, the plastic surgery group at the University rented a house across the street from the North Carolina Memorial Hospital where patients live at an average cost of \$8 per day.

"These patients don't need a job who demands a 40-hour productive work week or nothing."

Dr. Peacock said the experiment started 15 months ago with about 80 patients. They stay from two weeks to nine months but the average stay is six weeks. If the patient works, he pays half the daily cost of \$8. State agencies pay the rest.

"By providing low-cost ambulatory care for patients who need long-term rehabilitative work, we are trying to fill the void between a hospital bed and the facing of an intolerant, non-understanding foreman on a job who demands a 40-hour