

Julius Conner – IPHA President - 1971



PUBLIC HEALTH MEMORIES AT THE LOCAL LEVEL

(Written by Julius S. Conner, M.D., M.P.H. in March, 2010 for the 85th anniversary of Iowa Public Health Association.)

My Introduction to Public Health and the Iowa Public Health Association

My wife, Salina and I and our two preschool sons were returning to Iowa, from a year of pediatric practice in Washington, D.C. An opening for an Assistant Public Health Director, in Des Moines, facilitated our return in the summer of 1961.

I had met the Public Health Director, Dr. James Speers, during my pediatric residency at Blank Children's Hospital. Dr. Speers explained the epidemiology of the 1959 poliomyelitis epidemic in Des Moines. He described how he and the sanitarians would climb down manholes to collect sewer samples to trace the polio virus' route throughout the city. Polio Shot Clinics were then set up in key elementary schools to prevent further spread of the disease.

The day I started work, I came to Dr. Speers' office only to find him gone. His secretary said he had gone with the sanitarians to inspect the Ankeny Dump and wouldn't be back until afternoon. I spent my first day of work in a room down the hallway, the "Adah Hershey Memorial Library" named after one of the outstanding nurses of Des Moines Visiting Nurse Association. Melvin Lightner, Public Health Education Administrator, introduced himself to me. We found that we were both raised in Nebraska. Mr. Lightner explained the organization of the Des Moines-Polk County Health Department and allowed me to peruse a number of past annual reports.

The intimate relationship between health care and public health became readily apparent to me from my first day at work. And the transparent work relationships between sanitarians, nurses, physicians and administrators were evident as each work week progressed.

Dr. Speers and Mr. Lightner peaked my interest in the Iowa Public Health Association. After attending meetings and developing relationships throughout the state, I could almost always find the best solution to a local problem we were facing. In the succeeding years, all three of us and our Visiting Nurse Services Director, Marilyn Russell, went on to become Executive Board Members and President of IPHA.

SIGNIFICANT PUBLIC HEALTH DEVELOPMENTS IN 1970'S AND 1980'S

Housing Code Enforcement

Housing codes were being adopted by several cities throughout Iowa. Although the codes were designed to protect each citizen's health and safety, they were openly opposed by many people as an invasion of privacy. The traditional view of "A man's home is his castle" came forth. Local government also wanted to protect housing, its major tax base, by using building codes for new

construction and housing codes to maintain existing housing for as many years as possible. Federal grants to local communities, in some instances, require that a housing code be in place. Application of local housing codes have now become an accepted part of our public health practice.

AIDS Control

A deadly new human infectious disease was reported in the United States and the Western World. It presented with manifestations of an immune disorder in previously healthy young adults. The disease is also transmitted by blood transfusions. Health care workers took universal precautions by using sterile gloves when drawing blood from all patients. Some five years after its appearance, the National Cancer Institute isolated a retrovirus, Human T-cell Lymphotropic Virus, type 111 (HTLV-3) as the causative agent. This information led to the development of antibody tests for use in protecting the blood supply, diagnosing new cases of disease and identifying persons who may be incubating the infection. New epidemic control methods surfaced, such as needle exchange programs to protect those addicted to street drugs; condom and disinfectant give away programs to protect those with multiple sex partners. New medications were developed to treat the disease which is now known as AIDS (Acquired Immune Deficiency Syndrome). In the United States alone, there may be one to two million persons suffering from AIDS or AIDS-Related Complex (patients less than 60 years with Kaposi's Sarcoma or other life-threatening opportunistic infections, such as Pneumocystis carinii pneumonia).

Air Pollution Control

The purity of the air we breathe became an important topic of discussion and regulation at federal, state and local levels. Controlling pollutants in business and industry closely situated near neighborhoods became very complex. Economic development in central cities and suburban areas were determined in part by the ability to come up with ingenious ideas to maintain air pollution control standards.

Odor control was measured by the human nose as Des Moines Odor Control Panels determined which complaints had merit and which did not. The smell of freshly baked bread from a large bakery with its nice aroma was not excluded from regulation any more than the nauseous exhausts from the animal rendering plant.

Air Pollution Sanitarians soon learned to scale power poles as well as Electric Power Linemen. Air pollution monitoring devices were placed on power poles at strategic locations throughout the cities, suburbs and rural areas. Businesses and industries were required to contain their pollutants in house as much as possible.

A unique system was devised to allow expansion of businesses in the downtown Des Moines area. Carbon emissions from automobile traffic had to be controlled. The city decided to separate automobile traffic from pedestrian traffic, as much as possible, for air pollution control as well as for safety reasons.

The downtown skywalk system with public parking garages, major businesses, hotels, restaurants and public venue connections filled the bill for Des Moines. Downtown workers and visitors can exercise, eat, shop and work travel in comfort, regardless of outside weather conditions. Below, on the street, motorists can travel through green traffic lights with steady speed and less stopping or idling of engines, which increase air pollution. Less pedestrian traffic on the streets also increases the safety of both pedestrians and motorists.