article “The Jew in Medicine” appeared in the summer and fall issues of this publication in 1978.

In 1990 Dr. Glick received an award from Phi Lambda Kappa Medical Fraternity, “in recognition of his decades of cumulative contributions toward fostering the humanitarian aims and high professional standards of this fraternity and Phi Delta Epsilon fraternity,” the first time one medical fraternity has awarded a member of another such organization.

December 18, 1991, will mark the 91st birthday of a man who has cared for and loved generations of children and who has given much of himself to Phi Delta Epsilon for almost 70 years. No wonder people seek him out wherever he goes around Baltimore and no wonder his warmth, graciousness and spirit made my day with him one to remember. But none of this should surprise this legend of Phi Delta Epsilon: after 311, he’s a Glick!

Recareeering Instead of Retiring

by Maurice M. Tinterow, M.D., Wichita, KS, Alpha Nu, 1941, University of Texas Medical Branch, Galveston

Our society is aging but most older people I meet or see on the streets are as vital now as they ever were. What is going to happen to them as time goes on? There are the inevitable problems of health, but does growing old itself remove us from the mainstream of society? I cannot believe we have to follow the expected attitudes and programs set up for those of us who are growing older.

A theory, prevalent for many years, established the idea that learning decreases with age. As I sat in a class on aging at a local university I was told that, indeed, learning decreases with age. At that time I was 63 years old and, when I questioned the professor, I was told that I was the exception to the rule. I never thought I would reach the age of retirement and have to give up a successful career as an anesthesiologist. Most of my colleagues were beginning to retire and one day they were not there any longer. In addition, in a month or two, no one seemed to remember they had ever been there at all!

I am not sure it is this way in all areas of medicine, but as younger physicians entered into practice, I felt them nipping at my heels. I had already been practicing for over 30 years and, as you grow older, so do your patients and the surgeons with whom you work. Then the younger physicians and patients think you are too old to keep up with modern technological skills associated with your specialty and seek anesthesiologists their own age. This results in a decrease in the number of patients you see and in the number of hours you work. I knew there was a future somewhere for me and hoped I could one day quit practicing and walk out of the hospital without saying farewell or good-bye. I wanted to start a new career the very next day.

Dr. Roger W. Axford, Professor of Adult Education at Arizona State University, had coined a word “recareeering” in describing people who had left their occupation and had started an entirely new career. My main concern was whether I would have the ability and patience to persevere through the years it would take to complete studying for a new career. In addition, to embark on this new life, I needed the support of my family and associates.

I enrolled in an outreach program offered by Kansas State University in adult
education. It was strange to be a student again, to sit down and study for the many hours necessary to complete the courses. And I was still an anesthesiologist, which took most of my time. I had graduated in 1939 with a bachelor of arts degree and in 1941 as a doctor of medicine. Now it was 38 years later and I was beginning again. Everyone kept telling me it was impossible to complete the program at my age. I continued to take courses each semester and the more I took, the easier it became. Time passed rather quickly and I graduated in 1979, with a master's degree in adult education.

Now that I had met the challenge and had completed one facet of my intended future, many questions had to be answered. Should I stop now or should I continue on to the next higher degree in adult education? There was a serious problem to be solved. In order to complete the Ph.D. degree, I had to enroll for 24 credit hours on the main campus, a round trip of 256 miles weekly, and have relief from my associate practicing with me. There was the continued studying that would have to be done in addition to my full time practice of anesthesiology. The need for upward mobility present when I studied to be a physician was not there; instead there was the excitement of beginning a new era in my professional life. I wanted to teach and knew that if I didn't choose the opportunity now, there might not be another chance to engage in a professional area that would prove beneficial to others.

I traveled back and forth from Wichita to Manhattan, Kansas, for the next year and there were many obstacles — weather, work, and others too numerous to mention. I finally succeeded in making the grade and stood tall on graduation day when the hood, designating the Doctor of Philosophy degree, was placed over my head.

I retired from the practice of medicine in 1984 and was appointed professor of health science at Wichita State University in my home town. Having been a math major in my undergraduate years at Rice University, I was assigned to teach basic and advanced statistics as well as courses in continuing education. I enjoyed the teaching, seminars and student contact for the next six years. In 1988 the University found that I had reached the age of 70 and eliminated my faculty position. They said it wasn't my age but that the budget did not include a place for me.

I wasn't going to stop work. I had two careers and I was ready for the next. During my medical practice I had used hypnotherapy and acupuncture in pain relief. In Wichita the Center for the Improvement of Human Functioning International was starting a new program for chronically ill patients, including those with chronic pain. I talked to the physician who heads The Center and asked him if I could join him in treating those patients with pain. He agreed and I started working at The Center. I was now on my third career, working eight hours a day, five days a week. Holistic medicine was different from the other areas of my involvement and I am still practicing and hope to continue my work at The Center for many years.

Today older citizens are starting to make themselves heard. We do not accept the passive role assigned to us but it is up to us to declare for ourselves the values and attitudes which suit us best at this time. We do not want to be relegated to nursing homes or retirement villages and do not want to be displaced in the everyday world. Barring physical problems which come with aging, we can accomplish anything we set out to do. We do not have to be replaced by someone younger when we reach the age of 65. We have been active up to this point and want to remain active as long as we can.

There are many opportunities present today for older individuals in business, industry, profit and non-profit organizations and education. Many universities provide free tuition for courses taken by citizens over the age of 60 but few older persons take advantage of the offer. Why haven't they enrolled in these classes? Do they even know about these opportunities? This is our
chance. Learning is lifelong and we must continue in the mainstream of society as contributing members.

One does not have to get old in the mind. Keeping that part of us active and seeking challenges each and every day of our lives is the answer to satisfying and productive years in the sixth and seventh decades of our lives. There are hobbies to develop, volunteer services to give to others or just the idea that there is no need to become stagnant and waste away. Make it known that you are available for duty. There is still the capacity to perform, even though there may be obstacles in your way. Detour along another path that will lead you to the same success you had at an earlier age. The older generation is still a viable force and if we just stand still, we will subjugate our lives to stagnation and boredom. Pre-retirement planning does not always lead to retirement but can point to the development of another career for some of us. Why not more of us? We must stay active, be involved and alert and act as though there is a future for us. Take the opportunity to investigate what there is to achieve later in life and let others sense your intense desire to continue as an active member in our society. I was able to do it and today I am working to see that others realize the importance of not just stopping life at the age of retirement but making the years after retirement pleasant, exciting, enduring and, above all, filled with accomplishment. We must make constructive use of our lives for as long as we live. Now is the time for pre-retirement planning or, as it has been called, re-careering.

Roger W. Axford states in his book, Recareering, “shift gears before you’re over the hill.” I am ready for the next challenge. I have no idea what it will be but I am thinking about it before someone says to me, “you’re over the hill and too old to do anything else.” The word “retire” just isn’t in my vocabulary. I cannot see myself doing nothing, just sitting in a rocking chair and rocking away the rest of my life. I am looking forward to my fourth career!

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