A tribute to David Warfield Stires, JFP's founding publisher

The recent passing of the founding publisher of *The Journal of Family Practice*, David Warfield Stires, is an occasion to honor and celebrate his support of, and dedication to, the specialty of family medicine.

David and I began working together in 1970. That was one year after family medicine was recognized as the 20th medical specialty in the United States. It was also a year after



David Warfield Stires

I left my solo rural family practice in Mount Shasta, Calif. to convert the general practice residency at Sonoma

County Hospital, Santa Rosa, to a 3-year family practice residency affiliated with the University of California San Francisco School of Medicine.

In 1970, I'd just completed my first book manuscript, "The Modern Family Doctor and Changing Medical Practice," and I went searching for a publisher for it. After 2 rejections, I approached David, who was the president of Appleton-Century-Crofts, the second largest medical publisher in the country. He grew up in a small town near Canton, Ohio, and his father had been a general practitioner and a real country doctor. David immediately saw the value of my book, and our lifelong friendship began.

There was no *academic* journal in the field of family medicine at that time. The only thing that came close was the American Academy of Family Physicians' journal for summary CME articles, *American Family Physician*. As we got to talking, David saw the need to expand the field's literature base to articulate its academic discipline and report original research. We soon held an organizational meeting of a new editorial board in San Francisco. And in 1974, *The Journal of Family Practice* was "born" with Appleton-Century-Crofts as its publisher.

Because we had very little startup funding, we depended on advertising to enable

us to send the journal to all general and family physicians in the United States. In those early years, advertising income was sufficient to maintain the journal. But with increasing pressure to bring in more and more ad dollars, *JFP* was bought and sold over the next 16 years. And in 1990, I left as editor and began my stint as editor of the *Journal of the American Board of Family Practice* (now *Family Medicine*).

After more than 30 years in publishing, David and his wife, Wendy, moved to Albuquerque, New Mexico, where he pursued his lifelong interest in photography, and where his work was regularly shown in galleries. He and I saw each other frequently over the

years, often visiting in the Pacific Northwest. Beyond the many books that he published, he was most proud of creating *JFP*.

Today, 43 years later, David's legacy lives on in a vibrant journal and medi-



cal specialty. Thank you, David, for your lifelong support of family medicine and for your friendship.

> John Geyman, MD Friday Harbor, Wash.

Editor's response

Dr. John Geyman's tribute to *The Journal of Family Practice's* founding publisher, David Warfield Stires, provides me with the opportunity to do 2 things.

First, to thank John for his visionary leadership in founding and guiding the successful development of the first research journal for family medicine in the United States. (In 1970, family medicine was called "family practice," hence our name *The Journal of Family Practice*—a name we have maintained over the years because of its "recognition factor.") Much of the original US family medicine research of the 1970s, '80s, and '90s was published in *JFP*. I still remember the thrill of having my first research study published in *JFP* in 1983.¹

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Second, I want to remind our readers that although our focus has changed to mostly evidence-based clinical reviews, we remain firmly rooted in practical research that informs the everyday practice of family medicine and primary care. We still publish (albeit a limited number) of original research studies that have high practical value to primary care, such as a recent article on the use of medical scribes.² This is largely due to the foresight and vision of pioneers in this field like David Warfield Stires and Dr. John Geyman.

John Hickner, MD, MSc

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Vaping marijuana?

Cannavaping—the inhalation of a cannabiscontaining aerosol, created by a batterydriven, heated atomizer in e-cigarettes or similar devices¹—is touted as a less expensive and safer alternative to smoking marijuana. It's also gaining in popularity.² One study of Connecticut high school students found that 5.4% had used e-cigarettes to vaporize cannabis.³ But what do we know about this new way to get high?

We know that those who wish to cannavape can easily obtain e-cigarettes from gas stations and tobacco shops. They then have to obtain a cartridge, filled with either hash oil or tetrahydrocannabinol-infused wax, to attach to the e-cigarette. These cartridges are available for purchase in states that have legalized the sale of marijuana. They also find their way into states where the sale of marijuana is not legal, and are purchased illegally for the purpose of cannavaping.

And while cannavaping does appear to reduce the cost of smoking marijuana,⁴ it has not been widely researched, nor determined to be safe.⁵

In fact, although marijuana has several important therapeutic and medicinal purposes, cannavaping the substance can result in medical concerns.⁶ The vaping aerosols of some compounds can induce lung pathology and may be carcinogenic, since they often contain a number of dangerous toxins.⁴

Chronic marijuana use can increase the likelihood of motor vehicles accidents, cognitive impairment, psychoses, and demotivation.⁴ It may predispose certain individuals to use other drugs and tobacco products and could increase the consumption of marijuana.^{4,5} Increased consumption could have a detrimental effect on intellect and behavior when used chronically—especially in youngsters, whose nervous systems are not yet fully matured.⁷⁻⁹

Because cannavaping has potentially deleterious effects, more regulations on the manufacture, distribution, access, and use are indicated—at least until research sheds more light on issues surrounding this practice.

Steven Lippmann, MD; Devina Singh, MD Louisville, KY

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