



Orleans County Historical Association

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Orleans County Historical Association

INTERVIEW

Dr. Angelo Leone
200 Park Avenue
Medina, New York

Dr. Leone was born in Sicily in 1904.

Interview conducted by Helen McAllister of Medina, N.Y.

L Dr. Leone

Mc Helen McAllister





Orleans County Historical Association

ORAL HISTORY PROJECT

The purpose of this project is to collect information about the historical development of Orleans County by means of tape-recorded conversations with people whose experiences reflect the county's growth.

These tapes and transcriptions will be preserved as educational resources and possible publication (all or in part).

I hereby release this tape and transcription to the Orleans County Historical Association.

Cinglo F. Loone, M.D.
Signed

05 December 1978
Date

Understood and agreed to:

Helena McAllister
INTERVIEWER

December 5, 1978
Date

PREFACE

written by Lee Leone

(Mrs. Angelo Leone)

On May 17, 1974 Dr. Leone suffered an aphasic type of stroke which affected the power of speech. Webster says "aphasia - a loss or impairment of the power to use words resulting from a brain lesion". It was a most discouraging process for all of us. A brilliant man unable to carry on with the work he loved.

We traveled twice weekly to Mt. View Hospital in Lockport for speech therapy -- it was discouraging for while they said he had made the most rapid progress in three months of any patient they had ever had, the progress looked hopeless.

Not only was he unable to speak, it was difficult for him to read and grasp the thought of what he was reading. The brain cannot function. All conversation was of necessity repetitive for him to grasp the idea and meaning.

The progress tests that took place every three months were "spirit crushers". I could watch the test on one side of a screen and hear and see what Dr. Leone would say. The examiner would place eight or ten objects on a table and ask what he would use each for. Can you imagine the feeling when he would pick a pen when the examiner would ask what he would use for eating - or he would pick a fork for writing.

We continued the speech therapy at Mt. View Hospital for three years, and when we were in Florida would go to Palm Beach to the Crippled Children's Hospital where they did the same therapy.

God has been good and answered the many prayers that were offered in Dr. Leone's behalf. From a speechless man to one who has made tremendous progress, can express his thoughts more fluently, stumbles only occasionally over words, reads again and can understand what he has read - that is determination and progress.

His only regret is that he cannot continue his beloved medical practice. If he tried prescribing for people, he might confuse medication with disastrous results. We keep emphasizing that he has done so much for so many that he has earned the right to rest and enjoy life. But a dedicated man is always a dedicated man and he will always long for the work he loved best.

December 5, 1978. Dr. Angelo Leone, General Practitioner and Surgeon in Medina, New York, is being interviewed by Helen McAllister. The interview is being conducted in the Leone home, 200 Park Avenue, Medina, New York.

- Mc Dr. Leone, would you please tell us when and where you were born?
- L I was born near Palermo in Certa, in Sicily in 1904. My father was Peter Leone, and my mother was Concetta Coniglio.
- Mc How many children were in your family?
- L I was born in Italy but the other seven children were born in Avon, New York. (There were eight children in the family; seven born in the U.S. I was born in Italy.)
- Mc When did your father come to the United States?
- L My Dad came in the fall of 1903 for the opportunity to work and be able to feed his family.
- Mc Did he know somebody here? Is that why he came to this area?
- L There were other people that were leaving from the area in order to come to New York State with other people that were migrating from the area near Palermo. Those various communities would travel as groups to come to places in the Mount Morris area.
- Mc Had they been contacted ahead of time to go to Mount Morris?
- L Yes, by information from people that had traveled, they knew that they could get employment in that area.
- Mc Did your Dad have to go through Ellis Island?
- L Of course, everybody came through in those days; came through Ellis Island, and the large percentage of those people traveled, as I understand the documents, in the steerage. I remember the boat but I don't remember the name now. My Dad's citizenship papers had all that data.
- Mc When did your father become a citizen of the United States?
- L In the summer of 1911.
- Mc Did that automatically make you a citizen?
- L Automatically it made me a citizen at the age of seven. The Court House was in Geneseo (New York).

Mc What kind of work did your father do at Mount Morris?

L He worked in Avon on the Erie Railroad.

Mc Before that, when he first came, I believe you told me that he worked in the Processing Plant?

L Processing food, for one or two years... but shortly after, he was employed by the railroad.

Mc You said that you became a citizen under your father's wing, at the age of seven, in 1911. Was there ever a question that you were a citizen of the United States?

L ... There was no problem what-so-ever until I wanted to travel as a casual. Back in 1960 to get out of the United States to go to England, and to France, and to Italy, you had to have documents of citizenship or they wouldn't let you travel. So I had to go all through this data to establish the fact that I was born in this village of Certà. One of the attorneys, Norman J. Pescora of Buffalo, N.Y., communicated with the little community to get this data. Then, of course, the rest was easy - that I was a citizen by virtue of the fact that my Dad was a citizen in 1911.

Mc Did you attend and graduate from the Avon school?

L Avon High School, yes. I finished high school in 1925.

Mc What was your interest in school at that time?

L Primarily sciences and biological things with the idea, possibly, of going into dentistry.

Mc Before we leave your younger days: you were telling me something about how you enjoyed trapping?

L Oh yes! Well, in those days money was very difficult to get. So you had all kinds of trivial jobs and one of them was in the fall, especially in October and November; the winter months. I'd trap muskrats, and for sport get an occasional rabbit with a shotgun. But usually getting these traps and during the course of the season, each week or so, you might get one or two or three, and if you were lucky you'd get a few dollars selling the pelts. (75¢ per skin).

Mc Do you remember the first thing that you bought with that money?

L The very first thing was to get some skates because I didn't

have skates; and everybody that was anybody, had skates! And so that fall, with the first \$12.50 -- I remember that well -- I bought these Platter ice skates. That was a variety; Platter was the manufacturer. There was a pond in the Wadsworth area, just south of Avon. They would get ice in the pond and of course, there were places where you could skate. Then, of course, you got other things: gloves, and other things that you'd buy with a few dollars, and buy books.

Mc You said that you were interested in dentistry, so you went to the University of Buffalo Arts and Science?

L Yes.

Mc Because there were eight children in your family and money must have been a little bit tight, was there any kind of help in getting you to go to college, or was this done through really pinching the pennies?

L Primarily from my parents I was able to get into the college. After getting into the School of Dentistry, when I needed more, one of my sisters and her husband loaned me some money.

Mc The reason I'm asking about the money is that today there seem to be quite a few scholarships available for students.

L That began about that time, that you would get some money from the school system. They would give a small amount to supplement the cost of the school system.

Mc When you went to college, 1925 through 1928, where did you live? Did they have dorms at that time?

L No, they weren't in existence. You rented homes in the area, right adjacent to the campus of the School of Arts and Science on Main Street, Buffalo.

Mc You were in the University of Buffalo Arts and Science for Dentistry from 1925 until 1928. Then in 1928 you had a change of heart about dentistry and you decided to go into the study of General Medicine?

L Well, no. I affiliated with the School of Dentistry on High Street in Buffalo in those days, and I was affiliated in the School of Dentistry. It was at the beginning of the second year in the School of Medicine. Dentistry and Medicine were in the same building on High Street. The Dentistry School

was adjacent to the Medical School so that the classes of the first two years were all together: both Medicine and Dentistry.

Mc When did you change your mind?

L During the middle of the second year of the School of Dentistry I went into Medicine. The anatomy of the extremities wasn't the concern of the dental people. Everybody that was going into Medicine would do the complete body, but the dental people did the head, face, neck and chest of the body. The extremities were ignored.

Mc When did you graduate from Medical School?

L In June of 1932.

Mc Now, somewhere along the way, you met a very attractive young lady named Lena ("Lee") Caputo. Where did you meet her?

L I met her during the school year. They'd have some classes, dances or other functions, where you'd meet some of the students in the other school system. So then during the Senior year - I began in the fall - and winter -- is when I began dating; during my Senior year.

Mc You were married on June 29, 1933?

L That's right. Because at that time I wanted to continue medical training on the level of General Surgery but I couldn't get affiliated with any of the hospitals, and I had no choice so I thought, well, I'll go into practice because I couldn't get affiliated with the Meyer Memorial (Hospital), or the Buffalo General (Hospital), or any other hospitals.

Mc Why was that?

L Because the hospitals would not accept very many. At Meyer they would only take 12 from the Medical School; and Millard Fillmore (Hospital) and some of those, they didn't get very many of these new students. So students had to travel wherever they could, and the large percentage went into General Medicine.

Mc In September 1933 you made quite a change.

L Yes! Yes, because that fall I tried to practice for about six or eight weeks - that was July to August. We were in the middle of a depression and "making a living" was difficult so I

thought the better thing to do -- was to make a decision: either to go into the Army, or go into General Practice. I had a commission with the Army at that time, so I went into the active Army, affiliated with other work that they were doing for the Army.

Mc You have said that when you went into the Army you worked primarily in Pennsylvania under the CCC (Civilian Conservation Corps).

L We were in Camp Dix. We were there for a couple of months or so processing these -- they called them enrollees. They were young fellows, ages 17 to 22 or 23. I was just one of about 40 physicians that were processing these enrollees. After they were processed, usually not more than a week or so, maybe ten days, they'd ship them to communities or camps that were established throughout the United States, especially in the east and the south-east. They went into Arizona and into Idaho. I happened to be one of those fellows assigned to the Pennsylvania area, near Lewistown. (In a district with ten camps).

Mc And I believe that you stayed with the Army until 1936?

L Yes, the fall of '36.

Mc Then you have told me that you moved to Medina (New York). Why Medina ? We are very pleased that you came here, but what made you select Medina?

L Well, I wanted to be in a rural area that had a hospital nearby, and so I screened. I went around to all the communities that I could consider, in the western part of the state. Olean was one of them, and Batavia, Albion, Medina, and Lockport. I made visits myself by 'phone and by car to see those places. I thought that Medina had the possibility because of the good school system, lots of churches, and many people. In those days, there were a number of work opportunities. On the other hand, they weren't much worse off than some of those other communities.

Mc This was a depressed area at that time?

L Very much so! Anyway, I had to go somewhere, and some of my classmates had moved into this part of the state. Corning (New York) was one place, and Olean was another. And some of my classmates were in the Buffalo area.

- Mc The first house that you purchased is still your home in Medina: 200 Park Avenue!
- L Well, that fall we rented a house, the same one right here. We tried to establish an office in this house but the space was inadequate.
- Mc I can remember coming here, as a patient.
- L That's right! In fact I had plans, and I had an architect but it was not really adequate for growing children, and for space for a practice.
- Mc You have five children; is that right?
- L Two girls came first and then three boys. Angela was the older of the two girls; then Lucia, then Peter, and James and Michael. (See page 14 ; contributed by Mrs. Leone).
- Mc You were telling me the other day about having done some minor surgery in the homes, and of delivering babies in the homes, and of how it's all changed. Also something about Doctor Johnson and Mr. Chet Acer?
- L The very first surgical patient, the fellow is still living, was Chester Acer. He was right in his home and complaining of a belly ache which lasted over a few hours. And grossly I diagnosed it that he probably had an acute appendicitis. I did the blood work and one of the technicians, the only one at that time, took the urine and the blood over to the hospital. The blood count was, I forget, -- about 11,000 white blood count, with about an 80 percent polyform (SP??). Well anyway, he had acute appendicitis, so I advised him to have surgery now. The first remark was, "If there's any surgery, we'll have Dr. William Johnson do the surgery!" I said, "By all means have whoever you want". So, Dr. Johnson of Batavia was called by 'phone and he said, "I'll be over in another hour". He came over and examined him manually, and palpated his belly. He agreed that it was acute appendicitis: the count confirmed it. And an hour later, he was doing an appendectomy. After the surgery, the anesthesia, open-drop ether in those days, Chester was conscious, and Dr. Johnson was leaving to go back to Batavia. Chester asked

Dr. Johnson how much he owed him. He told him the amount and Chet paid him right there, and from then on I had to follow through with the post operative care, and had him there for about a week or so. Usually in those days, five to seven days, and then they could go home. So, that was the first hospital patient that I had. That fall, of course, I had other patients.

In those days, you had water infections; typhoid came that fall. Usually you have these cases in the spring, but in the fall I had one of the first ones. There were little red spots on the hand and the body of the patient and I couldn't figure out what it was until we found out through the laboratory and the New York State Health Laboratory -- where they check the water. They found that this was infected water. The fellow was treated as typhoid disease, and the thing was controlled alright. And then in the spring, I had a few more of those cases. Not very many because the only polluted water was in farm places. The water system in Medina was excellent because the water was chlorinated. It's those other homes on the farms that have an occasional polluted water.

Mc I remember the problems we had with polluted water when we lived on the farm on the Ridge Road for ten years!

(end of side I of taped interview)

L The things that you got in those days primarily was an occasional pneumonia, acute pneumonitis. That fall of 1937 was involved with trying to diagnose an occasional pneumonia, or acute pneumonitis. They were doing a big job trying to make a diagnosis of the variety of pneumonia because they used to test all the different types of pneumonia.

Mc They are still testing aren't they, with the Legionaire's Disease?

L Well, it's more accurate by identifying the bacteria that caused the pneumonitis infection. But that was in 1937, '38 and '39. The medicine used was sulfanilamide, an antibacterial agent. They don't use it very much now; it is used for skin infections. It is still an excellent drug.

- Mc Going back to medicine; you were saying that they used Nembutal for -- was it for women having babies? Is that used much anymore?
- L They still use it, yes. Not as much.
- Mc The use of medicine has changed drastically.
- L Well, it has been developed. Drugs that weren't available, and these are now more efficient and safer. Almost every month there's a new drug, and of course, they find their places. Some of them are depleted and we forget them, but new ones are developed. And this is a continuing process.
- Mc Did you say that Dr. Kent Williams came to Medina at the same time you did?
- L He came at the same time. He came in April of 1936, and I came in October.
- Mc You were the only two surgeons in the Medina Hospital then?
- L That's right. Everybody did General Practice but some of them had some surgical training.
- Mc Did you have to be a surgeon to do a tonsillectomy?
- L Oh yes! In my Junior year I was a student in Meyer Memorial (Hospital) and one of my classmates learned to perform tonsillectomies. ... He would do one side of the tonsil, and I would do the other side. He demonstrated the technique first, and then he showed it to me. There were residents that were primarily interested in eye, ear, nose and throat. They were trying to learn these various techniques. One of the fellows was assigned to ear, nose and throat and proctology! (laughter). There wasn't any connection, but you learned studying under these residents that were doing the ear, nose and throat surgery, and with any surgical rectal type of work.
- Mc Did you tell me that in 1939 you went to Chicago to study?
- L I wanted to get more training in General Surgery so I went to Cook County Hospital for an accelerated three months course in Surgery. This was a repetitive type of surgical procedure particularly the belly, rectum, breast and thyroid disease.
- after WW II in 1947
- Several years later, I spent some time at the New York Poly Clinic Hospital for more intensive training in Obstetrics and Gynecology.

- Mc A good doctor has to be a student all of his life, doesn't he?
- L I further studied at the Lahey Clinic in Boston, Mass. in 1960. You did all the techniques on the cadaver and under demonstration. Later you were allowed to assist a surgeon so that you could repeat the operative procedure. Hernias and abdominal operations were all done under directions.
- Mc Then in September 1942, since our country was at war, you went into the service of the United States Army?
- L That's right! I volunteered my services although because of family and age it would not have been compulsory. I felt it was my patriotic duty to serve my country and felt I could also learn more about Preventative Medicine.
- Mc After being in the States for awhile you eventually were sent to Hoboken, New Jersey, and eventually over to England?
- L That's right.
- Mc And you participated in the Normandy Invasion in Brest, France?
- L That's right!
- Mc You were saying that you worked in a Field Hospital, very much like the t.v. program "MASH" ?
- L That's right. In the first quadrant of people we had, I think, 55 physicians and about 250 people; about 60 women who were nurses, and all ranks of people in how to set up a field-type of hospital. I was just one of those physicians. (Dr. Leone has stated that he operated on German and French, as well as the U.S. troops).
- Mc The war was right there, all around you?!
- L That's right.
- Mc When V-E Day came, were you in Germany?
- L We were in Germany in 1945. Of course we celebrated not only as individuals but in units of Hospital groups. We were all hospital people and any casualties that were unable to walk would go to England by air after being in the Field Hospital.
- Mc You were discharged in November 1945 and returned to Medina?
- L To backtrack, in preparation for my War Service I was sent to Fort Smith, Arkansas where Camp Chaffee was located. I spent eight months there, and in August of '43 I was sent

to Washington, D.C. for a course in Tropical Medicine, for three months.

That November I was assigned with a group of physicians (Medical Detachment) to a Regiment of about 2500. Each Regiment had about five to eight physicians for 2500 soldiers. This unit I was assigned to (a regiment and three regiments comprised) was called the 14th Armored Division.

Mc You came back to Medina, and you have said that because we had so many stone quarries, we had lots of tuberculosis as a result of the work in the stone quarries.

L That's right. In the area of Hulberton, Albion, and Medina, people were working in the quarries and occasionally you'd pick up one of these tuberculosis cases. There was usually a very tedious study to establish the possible cause of tuberculosis: x-ray, sputa, and repeated sputa examinations. Of course the treatment was improved, and some of these drugs were being developed. Of course, the number of T.B. cases decreased. All of those patients used to go into Mt. Morris Sanitarium. The personnel at Mt. Morris had had special training and could help to establish a diagnosis and method of treatment.

Mc The medical profession has changed a great deal, hasn't it, with most doctors changing from being General Practitioners to becoming Specialists? What are the pros and cons?

L Primarily 85 percent of the people need general medicine care and need a diagnosis, or at least a tentative diagnosis. If you can't help the average patient with that problem, you refer him to somebody else.

Somebody has a hernia, for instance. Somebody has to make a diagnosis, and then if he needs a hernia surgical correction, somebody should know how to do it. I have that type of special training. I was interested in doing that type of surgery.

Of course, middle age and older age, you get an occasional patient with gall bladder, and an occasional appendicitis. Somebody has to establish what the cause is, and what they can do about it.

Mc With the Specialists we have a less personal approach, don't we? Do we lose some of the human aspect of contact or not?

- L Well, in a sense perhaps yes. But you're still dealing with people as human beings, not just as a case. You know them by their first name, you know their problems, their continuing problems, if they are in good health or not. The primary thing is to keep them in good health. If it is some problem that is corrective with surgical procedures, if you're not able to do that yourself, why you refer them to somebody that can.
- Mc You have told me that before 1950 you did all of your Medical Records, on each patient, by hand. That has changed hasn't it?!
- L Well the thing that was improved was that now you can use tape recorders. You'd get the data briefly, interview the patient and then immediately dictate it. There would be a continuing data for each visit. You would know what had preceded , and you'd compare what had happened and what the patient was complaining of now, and you would try to make a diagnosis. If laboratory data was necessary to make the diagnosis, why you'd get that in the hospital with the laboratory department.
- Mc I think that the average person does not realize how much work there is to be done with the Medical Records. Each doctor, each time he sees a patient, has to make a report and that is typed up. After that, the doctor has to read what was typed, and sign it. And this goes on and on, all behind the scene. Most patients are not aware of this, I'm sure. I didn't realize this before I worked in the Medina Hospital in the Medical Records Department.
- L That's right. If the diagnosis shows something needs emergency surgery, you've got to make a prompt decision. If it's a gall bladder disease, you can wait and see. You can do other studies and confirm those studies.
- Mc You have always kept very complete Medical Records, Dr. Leone, and they stand you in good stead in more ways than one. They help the patient to help you, and the records help to protect you against some insurance claims that some people might attempt to collect.

- L There's always the surreptitious individual that wants to get "easy money". But if there was any error, a human error, the object always was to protect the procedure and be as safe for the patient as possible. Some things, of course, will not commit themselves to cure; cancer for instance. You see the patient, and you've diagnosed the thing. And from the time it is identified, it's a malignancy type of thing that no matter what you can do - breast for instance. From the first time that you see it, he's doomed to have cancer. You hope that they can be cured, but some of them are not possible. Of course you send them to Roswell (in Buffalo, N.Y.), or to people that have the know-how to handle that type of thing.
- Mc Do you think that the day will come, and I hope that you will say "yes", when there will be a cure or prevention for Cancer?
- L Eventually. -- Well, of course, it's improved considerably. The technique of the care of every variety of cancer has improved tremendously. Some of those, of course, can't be cured definitively, but they can at least make it tolerable to die from something else, you hope, that is not preventable. But, by and large, the care of surgery of cancer is far better today and it is improving all the time because everyone is being concerned more with the speciality of that area of the body. They do diagnoses early as possible and as efficiently as possible so that I'm sure that there is more that will come that is not known now, or that is available now. But, it will come because these scientists are studying all the time trying to make these conditions better.
- Mc Do you think there will ever be a time when we will have National Health Insurance? Is that what they have in England?
- L Yes, we'll have some form. I think it will improve. There is a difference of opinion as to how to do it. The question, basically, I think, is how much of our wealth should be used towards treatment of people. What percentage of the wealth of a country should be used towards the treatment or care of patients? Of the sick? Originally the patients, as individuals, took care of their problem, but now they get a

percentage. Right now we are probably spending six or seven percent of the money -- these are round figures -- that is being spent towards treatment of people it's in the 11 or 12 percent right now, of the amount of money that is furnished by people. In other words, should you and I as individuals, what percent of our earnings should be used continuously towards medical care?

Mc Dr. Leone, you have seen lots of changes. For instance: the number of foreign doctors coming to our country; and the doctors often stay on. Is this good for our country?

L Well, there's goods and bads. Primarily they can earn money easier in this country than they can in the country of their origin. But they forget basically the fact that they're to serve the people. They can make money more rapidly in the States than they can ⁱⁿ their country of origin. The people that accumulated know-how or training prefer to stay here, but that's when they should really go back to -- their country of origin. But they're coming over here because they can get money more rapidly. I can see this myself locally in our community and in Albion.

Now I, in my practice, never requested a patient for money. If they could pay, fine! They'd get a bill. If they came in, I'd try to take care of him. try to help him, make a diagnosis, treat him and that was that. If they could pay, alright. If they didn't, alright. But some of these foreigners come over here for their fee. They see the patient, they want a fee right then.

Mc Dr. Leone, with the influx of these foreign medical people coming over here, do you think we will ever have too many doctors?

L No. No, because they can continue to do more intensive type of medical care. Previously, you see, too many, of necessity, did extensive type of medicine. In other words, cover as many people as possible. But you can do intensive care, in other words, more detail study of that particular patient. That is happening now. Do you follow me? In that Intensive Care versus Extensive Care. You see many patients superfluously, or a few patients extensively.

Mc Thank you very much for granting me this interview Dr. Leone.
L It was a pleasure to see you... (end of taped interview)

The following information was furnished by Mrs. A. Leone.

Dr. Angelo Leone has been active in the following organizations:

Gibson Anatomical Society - 1930
 Member of Alpha Phi Delta (University of Buffalo)
 President of Medical Society of Orleans County
 Member of Medical Society State of New York
 Chairman of the Orleans County Cancer Society
 President of Medical Staff of Medina Memorial Hospital
 Member of American Medical Association
 President of Medina Rotary Club
 Member of Medina Knight of Columbus
 Member of Buffalo Academy of Medicine
 Member of 8th District Branch of Medical Society
 Member of Shelridge Country Club
 Member of Transit Valley Country Club
 Member of Elks
 Selected as MAN OF THE YEAR 1977
 Past Member of Oak Orchard Power Squadron

Background of the Leone Family

Lee (Lena) born and raised in Buffalo, New York. Attended Albright Art School 1927-1930. Taught Art in Buffalo Schools until 1933. Married and lived in Reedsville, Pa. while Dr. Leone was with the C.C.C. Had Angela and Lucia born in 1934 and 1936. Came to Medina, New York in October 1936. Peter born in 1940, then James 1944 and Michael 1948.

Lee returned to University of Buffalo in 1954 to earn her Bachelor of Fine Arts Degree in 1958. Taught in Medina schools as substitute, and now maintains a China Painting Shop in her basement where she teaches classes.

Angela (Mrs. Kenneth Karlsen), graduate of Medina High School, graduated from D'Youville College in Buffalo, N.Y. with a Bachelor of Science Degree. Taught at the College at Night School while working days for American Airlines as a Special Reservation Agent. Upon her marriage, lived in Sacramento, California for ten years. Her husband's work brought them back to the East where he is employed as an electrical engineer for the Power Authority of the State of New York. While in California, Angela started to pursue a further career in nursing. She completed her work in N.Y. State and is also licensed as an R.N. She works part time at St. Luke's Hospital in Utica. They have

two children: Kristin and Eric.

Lucia, graduate of Medina High School, graduate of Wm. Smith College, taught in Medina School as an Exceptional Child teacher. Married Donald Sleight, also a teacher there. They moved to Buffalo and Lucia continued her education to receive her Masters in Social Services. She heads two offices: one in Tonawanda, and the other in Buffalo as Supervisor for the Mental Health Counseling Services for both these offices. Donald, her husband, is a teacher at Niagara Community College. They have three children: Lisa Beth, David and Rebecca.

Peter, graduate of Medina High School, was awarded a B.A. degree from Middlebury College, graduate of Suffolk Law School in Boston, Mass., is employed by the Commonwealth of Mass. as Chief Counsel for the Blue Cross and Blue Shield Department of that office. He is married to the former Roxanna Orlando of Albion, New York. They have two daughters: Petra and Sairey and reside in Melrose, Mass.

James, graduate of Medina High School, graduate of Wilkes College, and Masters from Alfred University, Ph.D. from University of Virginia. Resident of Concord, Mass. and he's been a Staff Psychologist in the Office of Career Development at Harvard University. He has recently opened his own office in Cambridge, Mass. He is married to Kathy Davis, formerly of Philadelphia, Pa., who completed her college education after marriage and graduated from Wellesley College five years ago. She is employed at Carter Ink Company as their Production Manager. They have two children: Megan and Matthew.

Michael, graduate of Medina High School, graduate of Genesee Community College with an Associate degree in Administration and received his Bachelor of Science degree in Economics from R.I.T. in Rochester, N.Y. He has been employed by the Consolidated Freightways Company in Buffalo, New York and resides in Medina. He is at yet unmarried.

Dr. Leone was interviewed by Helen McAllister. The original transcription was completed by Lysbeth Hoffman of Waterport. After examination by Dr. and Mrs. Leone with several additions and several deletions, final editing and typing was completed by Helen McAllister of Medina, New York.



TIME FOR REUNION--Bruce Rieth of Medina and Karen Raiber of Silver Springs are shown at their wedding with Dr. and Mrs. Angelo Leone who were special guests. The physician delivered not only the groom but his three brothers.

Reith-Raiber Rites

Family Doctor Gives Couple Good Wishes

Karen A. Raiber and Bruce T. Reith were united in marriage at 4 p.m. Aug. 11 at Trinity Lutheran Church, Lockport, and among the invited guests was a medical practitioner who delivered not only the groom but his three brothers.

Dr. Angelo Leone and his wife were present at the nuptial rites for the daughter of Mr. and Mrs. A. William Raiber of Silver Spings, and the son of Mr. and Mrs. Thomas Reith, 11272 Slade Road, Medina.

The bride was given in marriage by her father and wore a gown of sleeveless white organza trimmed in silk Venice lace. In seaspray empire gowns of silesta with spaghetti straps

and capelet style jackets were Patricia Hark, maid of honor, and attendants Phyllis Lux, Selene Swan, Kathy Lunt, Rhonda Lunt and Ann Rodden. Flower girl was Tammy Reith.

Mark Reith was best man and ushers were Randy Reith, Stacy Reith, Thomas Raiber, Steven Winkler and Charles Lux.

Following a buffet dinner at the Sheraton Lockport Inn the couple left for a wedding trip to Bermuda. They are now at home in Lockport. The bride is a 1971 graduate of Rochester Dental Assistants School and is working for Dr. Peter Mascari of Lockport.

The groom, employed at Harrison Radiator Div. GMC, has an associate degree in business administration and is

attending Niagara Community College to earn an associate degree in mechanical technology.