

The Journal of Osteopathy

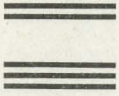
December 1901

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THE



JOURNAL OF OSTEOPATHY

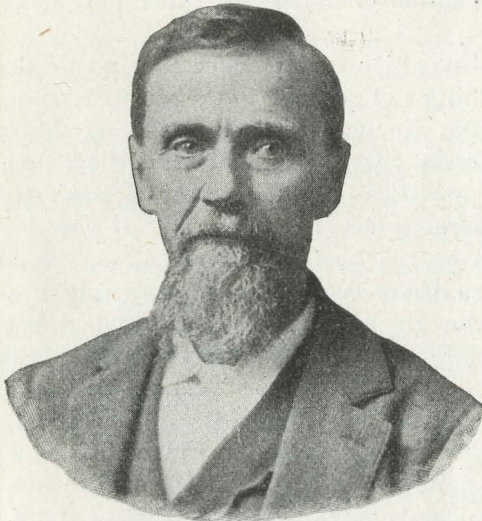
KIRKSVILLE, MISSOURI, DECEMBER, 1901.

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Dr. A. T. Still's Department.

DON'T MIX.

THEY begin with "Osteopathic School" and "Infirmity," then comes the kite tail tied to osteopathy. We are up-to-date; we give suggestive treatment; we teach suggestive therapeutics, water cure; we teach how and what to eat;



we use salt water and olive oil baths; we think all these doings "help osteopathy." All persons know that if they do not wash the dirt off once in a year or twice that they will stink a doctor out of his office. Osteopathy supposes that cleanliness is common. It makes me ashamed to read in any sanitarium journal or school catalogue claiming to be osteopathic to be so far off as to poke in a lot of cheap trash and say it will "help osteopathy." Such may come from old medicine fossils, but will not come from an up-to-date osteopathy of brains. The trouble comes from

genuine ignorance of anatomy and physiology.

He who knows only a smattering of osteopathy is just the man to substitute water cure, suggestive therapeutics, mesmerism, salt, oil and all kinds of systems, old and new, brag up osteopathy and use the name in big letters to catch customers and fleece their pockets. Osteopathy is a complete science and is not dependent on allopathy, homeopathy, eclecticism, suggestive therapeutics, christian science or any system or school of philosophy. But its own philosophy of surgery, midwifery, and general treatment are complete and defy refutation, and pronounces all conglomerates to be traps baited with flattery and deception to deceive the afflicted, to obtain their money. I repeat

that such writers do not know the first principles of the philosophy of osteopathy or their pens never would betray their ignorance by their weak productions such as I have read in journals claiming to champion a school of osteopathy. I am proud to find no brainy graduate of the A. S. O. guilty of any such short-coming. The successful osteopath knows his business and sticks to it.

* * *

INHIBIT: INHIBITION.

MUCH stress has been laid on the idea of inhibition of the nerves as a remedial agency. Allow me to say that inhibition is almost universally the cause of disease. Dunglison defines inhibit—to restrain or suppress—stimulate, to goad; that which excites the animal economy.

For the student's benefit, I wish to refresh his mind on anatomy, that he may fully understand what I wish to present as a truth, to guide him while treating his patients, and to point him to the dangers of doing more harm than good by pushing, pulling and kneading the abdomen, with the idea that he inhibits the nerves or excites them to greater energy thereby helping nature do the work of restoration of the normal functional action of the organs of the abdomen.

I will say after forty years' observation and practice that no good can come to the patient by pulling, pushing and gouging in the sacred territory of the abdominal organs, but much harm can and does follow bruising the solar plexus from which a branch of nerves goes to each organ of the abdomen. Upon that center depends all the functioning of the elaborate work of the abdomen. I say, hands off. Go to the spine and ribs only. If you do not know the power of the spinal nerves on the liver to restore health, you must learn or quit because you are only an owl of hoots, more work than brains. I want the student who wishes to know the work that is done by the organs or contents of the abdomen (the viscera), that he is also to know the danger of ignorance and that wild force used in treating the abdomen cannot be tolerated, taught or practiced as any part of this sacred philosophy.

You must reason. You can reason, I say reason, or you will finally fail in all enterprises. Form your own opinions, select all facts you can obtain. Compare, decide, then act. Use no man's opinion, accept his works only.

* * *

WHITES, LEUCORRHOEA.

A FEW sensible Americanized questions and answers such as, What is the disease you call leucorrhoea or whites? Why do you call it leucorrhoea? Does lucco mean something that is white? Why do you give nothing but big names and leave out causes. Why does she waste off or out that white compound? Our old authors have never told us a word that would point the student to the cause of such wasting of the bread and meat of a woman's life. Is not her blood the bread

and meat that sustain her life? If so, what effect would be natural to take away her life support? How high up her back and how low down on her sacrum will the student find nodes or clusters of lymphatics, glands, blood supply, fascia, muscles, membranes, cells, secretions and excretions, venous drainage and arterial supply? In a word, why are we summoned to learn how to cure an affliction that you cannot give us any light on its cause? As this is said to be a school of philosophers, where is the philosophy you have to offer the anxious seeker? When the pilot gets lost, then a committee of the whole is formed and suggestions are in order, from all or any one. A new pilot is sought. Trouble is in the camp, a remedy is demanded. The life of the old pilot will pay the penalty. A mutiny is in all the camps. A Moses must be found to lead. No old field notes will suit for guides. We have followed them to the letter. We are lost and to follow farther will be suicidal. Nature's compass must guide us is the report of the committee of the whole. Now let Moses tell what leucorrhoea is and its cure.

* * *

OSTEOPATHIC SURGEONS.

FOOLS write what they have read, wise men write what they know, have learned and proven to be true. They write their successes for the good it may add to the books of progress. In America we get tired and sick of clippings and compiled trash called "treatise" on this and that subject. We have but little use for quotations from old authors on midwifery, female diseases, surgery and general diseases. We are osteopaths and have no time to spare to listen or commit to memory anything from old books that are obsolete, dead and out lived by all men. Our success in knifeless surgery comes from superior knowledge of the form and uses of the whole body. We learn the form, place and use of the many muscles, ligaments, blood fountain rivers that supply blood to each part. We learn the location and use of the nerves, motor, sensory and nutrient, and must learn how to assist them to natural action, both to build and remove wastes, or we will allow waste matter to be piled up. Then if we do not understand how to set the excretory nerves to carry off such trash "tumors, etc.," we will begin to cut into the body and slash our knives into sacred organs, destroy the physiological uses, "cure" a few for a time and kill or maim for life seventy-five per cent. An osteopathic surgeon with a knife in his hand is a very poor argument for the professor who taught him surgery. Surgery to us is a very serious subject and does mean to know enough of the human system and its power to keep us in form and function that we will not be deformed and diseased by growths and decay, if we keep the body perfect as nature gave the body to man. Then to learn surgery here does not mean to cut and saw, but it means to stop and carry away growths by adjusting the body from the variations to the original, normal condition. Our students must learn to keep between the knife and his patient, he

must reason or he will fall into the old ruts of medical schools. I say in all candor that your finest powers of reason must be kept in trim or you will fail to cure, and may be meritoriously called a fool.

* * *

KNOWLEDGE.

KNOWLEDGE is the result of our mental faculties being trained in the school of Nature. Knowledge is Nature understood and when wisely applied results appear in all material forms and actions. Thus he who knows the most of Nature is the wisest man, and his supposed powers are only Nature shown by his genius in conducting cause to produce results.

* * *

ENGINEERING SKILL.

THE osteopath cures by his engineering skill, that skill is only obtained by careful study until the student has learned the parts and functions of the body by his anatomy. In descriptive anatomy he learns form and place of all the parts. By physiological anatomy he learns the functions local and general. By practice he learns to be skillful and he cures as Nature does when harmony prevails in the body. The doctor of osteopathy must acquaint himself with all organs, blood and nerve supply, their separate and combined actions and uses or he will fail in getting good results as he hopes to obtain. Thus his successes mark his scale of anatomical and physiological knowledge. A person may be very fluent in words and very foolish in practice, thus the great use of much practical training on the living patient in the school room. The more normal the better for the student; he must get normal in his mind, he must drop the idea of abnormal wisdom. Midwifery can never be learned from deformed pictures.

* * *

CONFIDENCE.

The osteopath who has not confidence enough in the science to implicitly rely upon it under all circumstances is not entitled to the respect and patronage of his patients, and should blush with very shame when he accepts the money from his patrons. In the hands of the qualified and experienced practitioner it can be depended upon in all diseases incident to this climate. Osteopathy will never be found united with saloons or combined with drugs.

OSTEOPATHY IN BRIEF.

HERMAN F. GOETZ, B. S., D. O., 348 CENTURY BLDG., ST. LOUIS, MO.

THE name osteopathy is made up of the Greek roots osteon—bone, and pathos—suffering (to suffer). Very often, here arises the first misconception of the science. A single word cannot explicitly define, nor can it fully explain, a complete work of the nature of osteopathy.



DR. H. F. GOETZ.

Take the term homeopathy, meaning—like suffering; allopathy, meaning—other suffering; what logical connection would these terms suggest to your mind, if familiarity with the parts that go to make up these practices did not immediately suggest themselves as you think of the names. A name stands for the parts of, also for the complete work.

Just so with osteopathy, it is not only the treatment of bone diseases, nor that all diseases are due to osseous lesions, that go to make up the true conception of osteopathy; but it is the use of the bones as levers to perform certain movements, thus contributing to the manual dexterity of the manipulation; it is their use as aids to diagnosis, and most important of all, it is the disalignment of osseous parts as *one* of the causes of disease, which makes the name osteopathy, as appropriate as could be expected of a single word.

Osteopathy contends, and has proven so often, that it can no longer be a matter of doubt, that the human body is a complete mechanism, containing within its tissues all the remedial forces essential and necessary to the cure of disease. Furthermore, if all the parts that go to make up the human body are in normal relation, that is, if every bone, ligament, muscle, nerve, blood-vessel, etc., are in their proper places and working order, then no such condition as disease can prevail.

Read this last statement again. It becomes self-evident, does it not? Certainly it is true, that if every part is exactly where it belongs, and discharging its duty, just as it should, health must be the result. Health depends then, upon the normal relation of the anatomical parts that go to make up the human body.

Disease must follow whenever this normal relation is disturbed; must follow whenever the organs of the body are prevented from discharging their normal physiological functions.

Now, I realize that I am carrying your thoughts along pretty rapidly, but read again, it can't help but become clear to you.

ONE CAUSE OF DISEASE.

Let us use a simple illustration. Fig. 1 shows the back view of the

nerves, 1, 2, 3, to 8, as they make their exit from the spinal column, as they pass to the different parts of the arm. The point is, if nothing interferes with the normal relation, or the proper functioning of the nerves, 1 to 8, if there is no displacement of bone, ligament or muscle; if there is no obstruction to the blood supply, the arm will be a normal arm—*i. e.* a healthy arm. But these nerves are liable to disease, and the causes are those that are suggested by the relation of these nerves to other structures. Any slight variation from the normal of the vertebræ that go to build up the spinal column, may cause a pressure on the nerves as they pass out between the vertebræ.

Nerves 1-8 also pass through, over, and under muscles. Exposure to cold, a fall, may cause undue contraction of the muscles, thus an abnormal pressure on the nerve is the result. Supposing this to be the case with nerve (1,) Fig. 1, a pain in the shoulder would be the result. Pain in any region we may now conclude is due to a pressure on the nerve supplying the region. Pain is also caused by a nerve receiving a deficient or perverted blood supply. Now, how can you relieve or cure the pain in the shoulder? Not by taking medicine; that is a make shift, a temporary relief, but by a mechanical manipulation remove the pressure on the nerve, be it caused either by a contracted muscle, or by a slight variation in the position of one or more of the vertebræ. Isn't that more rational? It certainly is.

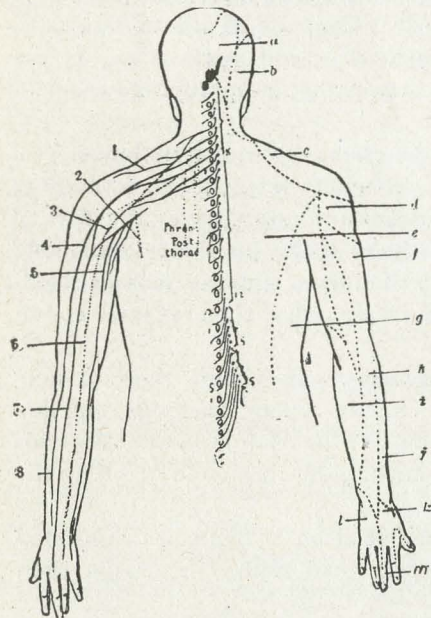


FIG. 1.

This then permits a second osteopathic deduction, namely: If all obstructions to the flow of the body fluids, such as the blood, the lymph and nerve force have been removed, nature will restore the region affected, to health. The constant tendency of a disease is towards the normal, that is why health is restored when you remove the cause of a disease.

The osteopath is often approached thus: "I can see why osteopathy is especially indicated, in fact is the treatment, *par excellence*, for deformities, for paralysis, for all chronic conditions, but how can you expect to cure an ulcer, a fever, and like conditions?" What are all these diseases, localized as an ulcer, general as a fever, due to, but to obstructed circulation of the body fluids—

of the blood and lymph? If I permitted myself to cite clinical evidence, it would be an easy matter to convince you, that all diseases submit to osteopathic treatment.

The first illustration (Fig. 1) points out how pain may be caused by a

contracted muscle pressing on a nerve. In addition to such pressure causing a mere pain, we must recall that motion, nutrition, and the regulation of the blood supply of the arm, are all controlled by the nerves as shown. Hence, aggravated conditions of nerve pressure produce paralysis, rheumatism, atrophy, and many other chronic conditions, in fact the majority of the disease that can effect the arm. All of these osteopathy cures or benefits.

But this pressure may not be in the course of the nerve, but take place at the point of exit of the nerve from the spinal column. To make this more clear, see Fig. 2, but in order to give another example of the wide application of this principle, of the effect of interference with nerve and blood supply, let us take the lower 6 dorsal vertebræ of the spinal column, instead of the arm as in Fig. 1. Fig. 2 shows these, also the nerves and the organs supplied by them.

A SECOND CAUSE OF DISEASE.

A, the fourth vertebra in Fig. 2 is purposely drawn in mal-position and in section, to illustrate the fact that pressure on nerves is a cause of disease; also that if the anatomical parts of the human body are not in normal relation, disease is the result.

Nerves 1, 2, are drawn very black in order to show that above A the currents of nerve force, which are essential to health, are not interfered with, but below A they are drawn thin and light, to show the effect of nerve pressure at

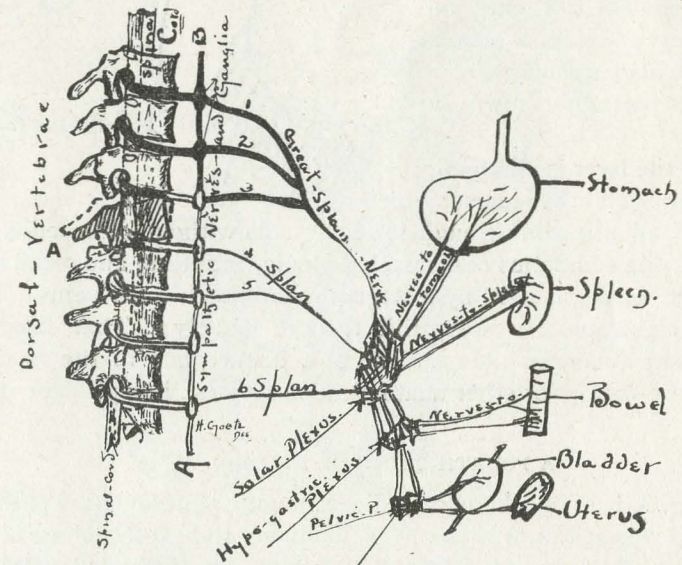


FIG. 2.

A on nerves 3, 4, 5, 6. By referring to Fig. 2, the organs affected will be noted.

The stomach, bowels, liver, etc., cannot be in a healthy condition if the nerve force, which is absolutely necessary to health, is shut off. Hence, any

of the diseases to which these organs are liable may be the result. But we have already shown that a contracted muscle has the same effect, then it is not necessary to our conception of disease that mal-position of this or other vertebrae is the only cause of dyspepsia, biliousness, malaria, constipation, etc. Contracted muscles of the back, by changing nerve currents, and blood flow, will have a like effect.

We have now explained two conditions, which may so weaken the nervous system, that it becomes an easy matter for disease to invade the body.

Just as a matter of reference, let me add that the osteopath contends that there must be such weakening of the nervous system or other tissues, in other words, must be a predisposing or exciting cause, in order to permit specific germs to cause disease. We, as a school, do not deny the existence of disease germs, but do hold that these is not yet sufficient proof to make the theory that they are per se the cause of disease, tenable.

A THIRD CAUSE OF DISEASE.

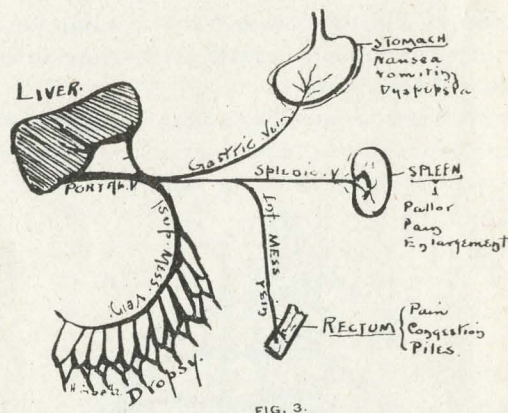
Fig. 3 illustrates the circulation of the blood, commonly called the portal circulation, in the veins of the spleen, stomach, bowels, rectum, as it passes from these organs to the liver. The health of these organs is dependent not only on their perfect nerve supply, as shown in Fig. 2, but also upon a perfect blood supply, as partially shown in Fig. 3.

In this case the liver is diseased, the circulation from the stomach, bowels, spleen, should pass through the liver cells without obstruction, but it cannot; hence, the symptoms of stomach, splenic, intestinal and rectal trouble, as shown in the figure, caused by a stagnation of blood in the veins.

Fig. 3 explains another osteopathic theory, namely: That disease may arise in any part or organ independent of a disturbance in the mechanical alignment of the osseous or other anatomical structures, independent of nerve pressure.

A FOURTH CAUSE OF DISEASE.

Thus, Fig. 3, is really the correct diagrammatic representation of the cause of symptoms of degeneration of the liver, following the excessive use of alcohol and over-eating, (and is given here because I wish to forever relieve your minds of the idea that the osteopathic theory is, that only displacement bones can cause disease), which permits us another osteopathic conclusion. Disease may be caused by violating the rules of correct living, by neglecting the laws of health and hygiene, for example, over-eating and drinking. Thus, if the

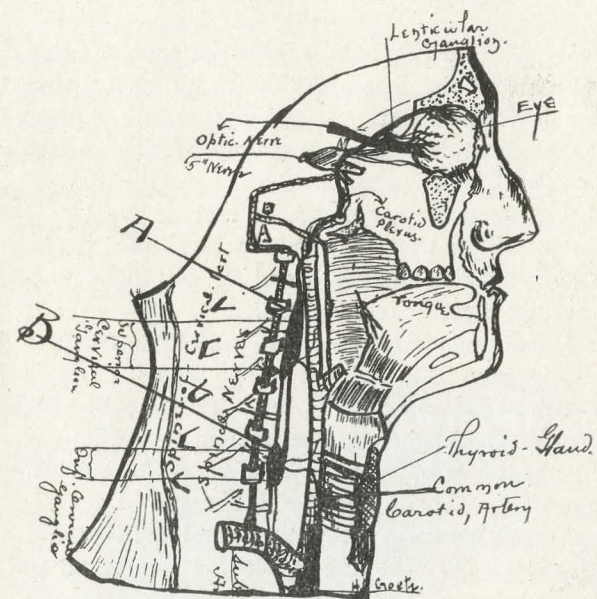


patient has dyspepsia from over-eating or any other cause, we do not place him immediately in the class as shown by Figs. 1 and 2. We will discover the cause by getting the history of the case, by examination. But osteopathic practice is unique in this respect, and in this it also differs from all other schools of practice, we carefully trace the nerve and blood supply of every condition as evidenced by the symptoms, we make an anatomical diagnosis. We seek the cause of symptoms and treat that cause.

NERVE CENTERS.

The treatment of nerve centers is an important one, and is especially a fundamental method in osteopathy. It is proven by physiology, that nerves may be STIMULATED, that is, the strength and force of nerve currents may be increased, also that nerves may be INHIBITED, that is, the nerve current may be decreased—by manipulation; thus, in palpitation, the heart may be made to beat slower, or a heart beating too slowly may be made to beat faster.

We have taken advantage of these facts and applied them to the treatment of those diseases which are caused either by over or under activity of nerve centers. For example: A goitre is quite often (not always) due to over-activity of a large nerve center, marked "A" in Fig. 4.



The treatment here indicated is to decrease the strength and force of the nerve currents as they pass out from "A" to the Thyroid gland (which when enlarged is called a goitre). That the goitre decreases in size, under this treatment is sufficient evidence of its efficacy as a therapeutic procedure. But this nerve centre "A" also sends nerves to the eye, to the heart, to the blood-

vessels of the head; hence, all diseases which affect the eye, ear, nose and throat, and heart, are amenable to osteopathic treatment. Remember, that stimulation and "inhibition" of nerve centers forms one method of treatment, others have been cited under Figs. 1, 2, 3.

I touch this subject only briefly at this time, but the object of this article will be attained if your conception of osteopathic diagnosis and treatment, and their possibilities have been widened.

You will know now, that displacements of bones, etc. (Figs. 1 and 2), play, after all, but a small part in osteopathy, these are but one idea. That disease can arise in organs independent of actual displacements, (Fig 3) another idea.

That disease may arise from over or under activity of nerve centers (Fig. 4) independent of either causes named, must be another consideration. That osteopathy has a profound hypothesis and a wide working basis and application must be evident.

To no other morbid condition does the osteopath assign greater importance than to the mal-position of abdominal and pelvic organs.

Displacements of the abdominal organs, as, the stomach, liver, spleen and kidney; of the pelvic organs, ovaries, uterus, rectum, are a most fruitful source of ill health.

Under disease of the pelvic organs, falls the consideration of nearly all the "Diseases of Women," the treatment of which has always offered greater opportunities for meddlesome surgery and temporarily palliative medical treatment than all other diseases combined, simply because of failure to recognize the primary cause of these conditions.

When is a floating kidney, a displaced uterus, hyper-sensitive ovary, etc., ever a primary condition that is purely a local affection? Rarely, if ever? Given any of these chronic conditions, and we will find that all the abdominal and pelvic organs are more or less concerned.

The patient complains of nervousness, backache, fatigue, on slight exertion, disordered menstruation, and similar symptoms. Diagnosis: Displaced uterus or laceration of cervix or prolapsus. Treatment: Strictly local, anti-septic douches, pessary, dilatation, currentment, operation.

Result: Persistence of symptoms, after all treatment, even after total extirpation of organs. Why? Because, if the first diagnosis had been carefully made, or if carefully made, carefully considered it would have resulted in the knowledge that not only the uterus, but the abdominal and pelvic organs were at fault, every physiological process perverted.

The treatment is, to place those organs back where they belong. The patient must have her vital energies regenerated, must have the nerve force and blood supply of these parts properly regulated, and until this is done medical and surgical treatment will ever be temporary, unsatisfactory measures.

Osteopathy accomplishes four things in these cases and common sense will teach that they are necessary before health can be expected.

- 1st. It replaces, by mechanical manipulation, the displaced viscera.
- 2d. It accelerates the blood flow passing through the organs at fault.
- 3d. It increases the strength of the nerve force, increases the vital energies so essential to health.
- 4th. It corrects anatomical variations of the osseous structure. This last is necessary because in the majority of pelvic and abdominal displacements we find the trouble to be with the lower portion of the spinal column, usually the dorsal and lumbar vertebræ are "too straight." Has it ever occurred to you that in the spinal cord originate nerves that control these organs, and interference with the proper distribution of nerve force by pressure as shown in Fig. 2, always causes mischief.

In osteopathy we have the remedial agent best calculated to cure that vast number of diseases usually classified as "Diseases of Women," and without subjecting the patient to the annoyance of medical treatment, or the dangers of surgical interference.

TENDENCY TO THE NORMAL.

G. D. HULETT, B. S., D. O., PROF. OF PRINCIPLES OF OSTEOPATHY, AMERICAN SCHOOL OF OSTEOPATHY.

AN authority, than whom none is greater, has made the statement that "health is natural; disease and early death is unnatural." In schools for the teaching of the osteopathic system, in discussions between the practitioners of the science, in pamphlets explaining osteopathy to the non-professional, the same truth is promulgated either by direct statement or by implication, until the assertion that nature constantly "tends to the normal" has become axiomatic. The statement is a general one, and like all such is often resorted to as a make-shift for "covering a multitude of sins"—of ignorance. And though no doubt a subterfuge in many cases, that fact makes it no less a general truth which may in countless cases be made specific and established by all the laws of logic. Further, like many other general statements it may be extremely difficult to explain in its numerous details and even occasionally in its more gross aspects.

The conception involves more than the relation of man's organism to other forces and to matter itself—it involves the entire question of the relation of organic to inorganic material—in a word, the nature and manifestations of life. For what is true of life in any form must be true of life in all forms, so far as the essential characteristics are concerned. If man's nature tends to a certain equilibrium in its physics, its chemics and in its possible forces beyond physics and beyond chemics, the same law of equilibrium must be operative in all living beings, the differences in appearances depending on differences in the media through which the life is manifested. What is true of the unicellular organism in its functions associated with nutrition is true of multicellular man. In coming in contact with a particle of nutrient material the amœba, in the process of entangling itself about the particle, only obeys a law of response to

a stimulus and in so doing manifests a disposition, whether purposeful or otherwise, to maintain within itself a condition normal to the species. In like manner, the complicated organism in man, in performing the numerous details of function embodied in the general mechanism of nutrition only follows the same general law that life is represented only in the response of irritable substance to stimuli. Similarly the force that causes the amœba to reject matter of no further use to it, or of positive harm to it, is the same force that is operative in ordinary peristaltic voidance or in extraordinary anti-peristaltic expulsion in vomiting. In either case the activity is brought about through the agency of stimulus acting on matter capable of being stimulated.

If the foregoing be allowed, we may accept in part, at least, the Spencerian conception of life as the "adjustment of internal relations to external relations." True it is that the internal relations are to a certain extent fixed in their form and their function. That fixedness depends on the principle of heredity which compels a conformity to type—the type being considered as a normal. But we know that types are changed, species altered through various forces that may be considered antagonistic to heredity—those forces that may be comprised under forces of variation or of adaptation which in distinction from heredity, compel an unlikeness in form and function, and hence constantly tend away from the type. These variations from the type are the product of adjustment of internal conditions to external stimuli. In other words we find that the environment of the individual acts as a stimulus to a likeness or an unlikeness in the development of an individual or a race, and it is in this continuous natural and necessary response to stimuli of environment that a normal condition of life is maintained and a disintegration of substances and forces prevented, the tending to the normal being merely a necessary activity to maintain an individuality conforming to the laws of physical, chemical and vital affinity, such affinity being modified only by the forces of environment. Now, if environment is constantly changing, the organism must be as constantly changing in its adjustments to the new conditions that present themselves. Hence arises the further conception of an organized life as a "moving equilibrium"—external influences constantly tending to destroy that balance, internal influences as continuously tending to regain and maintain it. If the former forces become predominant disease results. If the latter be, supreme health must be constantly present. In the ability to fully and properly respond to the stimuli furnished by surrounding conditions, by changes to suit the new circumstances, we see exemplified the power of the organism to maintain a normal living condition.

Further, we know that one of the factors which modify the response of living matter to a stimulus is the strength and abruptness of the application of that stimulus—a graduated application producing in a given case no appreciable immediate response, where one suddenly and strongly applied will produce an immediate and extreme response—by rapid and important change in function—a change either in quality, quantity, or both. For instance, an indivi-

dual suddenly exposed to an extreme change in temperature responds by an attack of pneumonia, in which case there is a failure to adjust internal relations to external relations. On the other hand, the gradual onset of temperature change produces no apparent disturbance of function, the internal relations being modified sufficiently rapid to present no appreciable impairment of function. In the one case the "moving equilibrium" has been at least temporarily impaired; in the other no impairment is appreciable. In the one case we see disease; in the other none is apparent. But this phase of the problem suggests another conception of the life process. We speak of the one case as presenting no *apparent* disturbance. There manifestly is present a disturbance in the sense of change, at least. But that change is not of sufficient grade to produce subjective discomfort. Which idea would imply that disease may be but a relative term, being a response to stimuli, sufficient in degree to produce subjective or objective symptoms not present in the *average* life. And it is the average life by which we judge the normal life, so that in the sense of the organism constantly presenting average manifestations, we speak of the natural tendency being toward the normal. But we know that what may be normal in one individual would be abnormal in another. We see an example of this in the condition of bowel activity. In one individual two evacuations per day is essential to maintain a subjective sense of comfort. In many others one action on alternate days seems to be necessary to preserve the normal functioning as evidenced by the senses. In the first case absence of evacuation for two days would produce decided indications of disturbed functions, as would the latter case if two daily evacuations should occur. By nature (heredity), education (environment, etc.,) the two natures are kept in a condition which to them is normal. So in the case of the same individual under different circumstances we see evidences that what may be a normal condition at one time or place is not a normal condition at another time or place. At a low sea level eighteen respiratory movements per minute may be the number sufficient to prevent any symptoms of disordered function. At an altitude of twenty thousand feet the same respiratory activity would be entirely insufficient, hence not normal to the changed conditions. But in both cases nature is functioning properly to meet the changed environment—and therefore evidencing an ability to sustain herself under varying conditions.

Having indicated that the normal condition is one of a rather uncertain nature so far as an aggregation of individuals is concerned, we may with advantage inquire as to what may constitute the normal in any given case and mention a few of the phases the tendency to the normal may present. The essential manifestations of a normal function in any given case will depend on the two factors which have been before mentioned, namely, heredity which tends constantly to maintain an organism essentially like its progenitors, and adaptation which tends to change the organism in structure and function to correspond to the new circumstances that constantly arise. It is with this second factor that the tendency to the normal is most directly concerned, heredity

being conservative, adaptation being progressive tho not radical. But, as is the case in other line, both progressive and conservative are essential in keeping intact the moving equilibrium above referred to. In the process of adaptation two factors are noted, namely, irritable material and a stimulus. The life, the "moving equilibrium," is propelled forward in response to the force from a long lines of ancestors. Unmodified by any further forces it would ultimately lose that living equilibrium by virtue of its unchangeableness—would meet with environmental forces with which it would clash, the ultimate end of which would be destruction. But the other factor comes into activity and constantly modifies the nature of the organism, thus presenting a yielding front to those changing stimuli of environment, and thus still maintaining a fairly stable equilibrium. In the ordinary course of the life the stimuli that act upon the organism are not intense and are more or less graduated in their application—for instance the gradual change in temperature above referred to. Under such condition the response to the stimulus is so gradual and so slight that no unusual manifestations present themselves—hence no diseased condition appears. In an extraordinary case, the change of temperature is so abrupt and extreme that the response to the stimulus is either so extreme as to produce unusual manifestations, or the stimulus so intense as to produce inability to respond, and, other forces becoming disorganized because of disturbed equilibrium, other unusual manifestation are presented and disease prevails.

A further fact becomes of interest and of considerable practical importance. The life power in the organism is not limited to an ability to maintain a normal function and to restore such when it has been lost. It is sufficient in countless cases to operate successfully in controlling structure. We are told that in the development of a race certain structures once present and essential to the performance of function have been lost through the decline of function associated with such structure. We are further advised that certain structures to-day present were once not so and have only been produced through the necessity arising from an increase of certain function or addition of new function. And in this sense the function has been the primary factor, the structure secondary to it. Is it possible that function may govern structure noticeably during the development of the individual as well as during that of the race? Is there a tendency to the normal in structure as well as in function? A few illustrations will make the answer positive. A bullet pierces the organism and becomes lodged in a fleshy part. It is not immediately removed. After death, which may not have occurred till years afterward, it is found still lodged in the fleshy part, surrounded by a fibrous capsule which has effectually prevented any toxic effect. What has taken place? The presence of the foreign body in the tissue has acted as a stimulus to function of secretion—new structure has been produced. So far, then, as the maintenance of the "living equilibrium" is concerned, the individual is normal structurally. What happens in a case of fractured bone? The fracture affords the stimulus to new functioning, material is produced which re-unites the several parts,

and the normal structure is restored. In each of those cases the abnormal condition is the external influence that has caused an internal change resulting in the adjustment necessary to a normal life. And they further render it strikingly apparent that, in the words of a prominent osteopath, "disease is the stimulus to its own cure."

Summarizing, we make several propositions, which, while not capable of exact demonstration, yet may furnish sufficient evidence to merit further study.

1. The "tendency to the normal" is not a question of man's organism merely, it is a question of the nature of life itself.
2. Life processes are largely a matter of adjustment of the organism to its environment.
3. The environment itself being the stimulus to adjustment.
4. Life presents an equilibrium, the appreciable disturbance of which constitutes disease. But the appreciability depends on the strength and abruptness of the stimulus, and hence
5. Disease is but a relative term.
6. The normal life is judged from the average life, but
7. What is normal to one is abnormal to another, and what is normal to one individual at one time or place is abnormal to the same individual at another time or place.
8. The factors constituting the normal individual life are those associated with heredity and adaptation, the former compelling a likeness, the latter an unlikeness to the type.
9. The factors in adaptation are irritable matter (the organism), and a stimulus (environment), the inter-action of these two maintaining a normal condition in the life of the individual, by which
10. Both *function* and *structure* constantly tend to the normal.

THE RESULTS OF OSTEOPATHIC TREATMENT IN DISEASES OF THE EYE.

C. W. PROCTOR, PH. B., D. O., PROFESSOR OF NEUROLOGY, AMERICAN SCHOOL OF OSTEOPATHY.

No organ of the body is subject to so great a variety of affections as the eye, and no class of cases yield more remarkable results, when treated by osteopathic methods.

The complex organization of the eye makes possible its great variety of diseases; and its wonderful sympathetic nerve supply accounts, in a measure at least, for the success of the treatment.

I will give a brief outline of some affections of the eye and cite some cases which illustrate the results of treatment. But, at the outset, I wish to emphasize the fact, that no claim is made that all eye troubles can be cured. The cases cited are from the successful ones, but as everyone knows, there are always some which are incurable. One claim *is* made, which is justified by experience, that cases otherwise pronounced incurable have been successfully treated by osteopathy.

Beginning with the outer portion of the eye, we will first notice a certain growth called *pterygium* which begins in the corner and extends gradually toward the pupil. This is quite common and the usual remedy has been to remove it by surgical means. When so removed it has frequently returned. In 1898, a gentleman of my acquaintance about thirty-five years of age found such a growth extending across the eye. He consulted an oculist and was told that there was no remedy but the knife. He was treated about two months by a senior student and almost every trace of it disappeared. Since that time a great many cases have come under my observation and all that I have been able to continue observation upon have been improved.

A kindred affection is inflammation of the delicate membrane covering the front of the eyeball and the inner side of the lids, called the conjunctiva. This assumes a variety of forms and often becomes chronic. Treatment is almost invariably helpful when the patient is able to take the proper care of himself.

There are probably a dozen cases of *conjunctivitis* of from a few months to several years' standing now being treated by senior students, and while some of these cases are improving but slowly, others are rapidly yielding.

The above named diseases do not usually affect the sight, but a cloudy appearance of the transparent portions of the eye, such as is produced by inflammation of the cornea, or an opacity of the lens, commonly known as cataract, do cause partial or complete blindness. The former of these often results from an injury, the latter is common in people of advanced years. Both are apt to result in permanent blindness. Of the former several cases have been cured when the injury was not such as to directly injure the cornea and when not of too long standing. But the curing of a genuine cataract has resulted, not only in cases recently reported, but in several cases which Dr. Still treated before he founded the school to teach his system of treatment.

A case of special interest was that of a gentleman at Marion, Ill., reported by Dr. L. M. Schofield. A man of little past middle age, had a cataract form in one eye. It was diagnosed as such by several physicians, among them an eye specialist. Sight was restored in fourteen treatments. A lady now taking treatment is eighty-three years of age and her sight has in about a dozen treatments been materially improved. These are cases where there is a wide degree of difference. One is comparatively young, the trouble was of rather short duration, the other is aged and the cataract of years standing and yet the unfavorable case is slowly yielding.

Hemorrhage into the retina causes blindness, is usually sudden and recovery is doubtful. One case has been reported to me. Examination with the ophthalmoscope showed patches on the retina, but after three months treatment the retina was much clearer and sight much improved. The case was one of long standing, and other forms of treatment had been tried without success. Inflammation of the retina offers much less difficulty than the case just described.

Another class of cases, where blindness, complete or partial, is due to an

injury of some sort of the optic nerve fibers, somewhere between the retina and the cerebral convolutions, has been treated with varying success. Among the most common causes of this sort of blindness, is too little or too much blood in the vessels which supply this nerve. An injury in the back, or neck, frequently so affects the circulation to the head that blindness follows. Two very remarkable cases serve to illustrate this. One, a girl, fell from a swing and was totally blind for nearly twenty years. She recovered a fair degree of sight in a few month's treatment. The other case was that of a middle aged man who fell from a moving car. He gained some power of sight in a few months, but three or more years elapsed before he could see to read. One case of optic atrophy, so called, is now receiving treatment, and sight is improving.

In general, I would say, tumors, cerebral injuries and similar conditions within the cranium would offer little hope of recovery, but conditions of impaired circulation are apt to respond to treatment. Changes in the shape of the eye, or in the hardness of the coats, as in astigmatism or glaucoma, have yielded to the treatment.

I hope to be able to discuss at some future time more of the philosophy of the treatment and the relation of affections of the eye to other conditions of the health and to certain injuries remote from the eye. I would appreciate brief reports of eye cases from the practitioners of osteopathy.

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### ANNUAL MEETING OF THE OSTEOPATHIC ASSOCIATION OF THE STATE OF CALIFORNIA (INCORPORATED) NOV. 4, 1901, LOS ANGELES.

#### PRESIDENT TASKER'S ADDRESS.

To the members of the Osteopathic Association of the State of California, greeting:—One year ago the 3d of this month our association was born. Its birth was in the midst of a lively political campaign. When all citizens of the state were strenuously battling for the success of their various political principles, we quietly organized ourselves to do battle for principles which we hold dear. We believed that we ought to be free to follow our profession independent of the dictates of any other school of the healing art. Our organization was born for the purpose of winning professional independence in the state of California.

The officers whom you elected to lead the association during the first year of its life have worked earnestly for the best interests of all. It will always be a pleasant memory to recall the unwavering support you have all given.



DR. D. L. TASKER.

Osteopathy became a legalized profession in this state March 9th, 1901,



and on the 2d day of April you elected a Board of Osteopathic Examiners according to the power vested in the Association by the state law.

The board met in this city April 21, and organized itself to do the work required. The board found itself confronted with many problems, but thus far everything seems to have been done well. Sixty-five certificates have been issued. Five applications have been refused and the applicants notified to submit to examination by the board at its regular session for that purpose next February. The first regular examination was held in San Francisco, July 16th, 17 and 18th, 1901. The work done by our secretary, Dr. Sisson, has been great. The demands on his time and strength have been cheerfully met and his work has been done neatly and in accordance with the directions of the board. \* \* \* \*

This great change in our position with reference to the law has been secured so quickly that some may think it was an easy victory. Think not so. This victory was gained because we were a united body of men and women, working on the side of right and truth. It was truth that prevailed, we championed it.

I cannot proceed until due credit is given to those individuals, who used extraordinary efforts to further the interests of the association in the legislature. To Dr. C. A. Haines this association owes thanks and gratitude for his sterling work in Sacramento that made it possible to have plenty of willing workers among the laymen. His patients at all times were ready to assist in any way possible.

To Dr. W. J. Hayden, our efficient secretary, we owe appreciation and thanks for the laborious work he has done. The letters written, notices issued and other duties of his office have required a great deal of time and thought. I have every reason to be glad that this association has had so efficient a secretary. In the early stages of our legislative efforts Dr. R. D. Emery conceived and executed a plan whereby we were able to have the personal signature of prominent men in many portions of the state for the purpose of assisting us in impressing the legislators with the fact that the public was interested in our bill. \* \* \* \*

There is much to be accomplished in the coming year. Thus far the association has devoted its energies to putting legal safeguards around its members, it must now commence the work of drawing on the special abilities of individuals for the good of all. It must represent the osteopathic profession to the world as an aggregation of men and women possessing intellectual and moral worth. Here high ideals must be nurtured. Professional skill and education must be called upon to give its best for the good of all. \* \* \* \*

#### THE SECRETARY'S REPORT.

Fellow osteopaths, many of you are familiar with the work of our association and the progress we have made, but for the benefit of those who have not met with us before or been made acquainted with the work during the

past year, I will give you a brief outline. Several attempts have been made to organize the osteopaths of the state, but failed because the representation was not large enough at any meeting to gain the common opinion on all matters, consequently a permanent organization seemed a thing almost impossible. On the 15th of October, 1900, we conceived the plan of organization and representation by mail until we could reach a harmonious working order all over the state. I approached Dr. Tasker with the plan, in which he readily coincided. We sent invitations to all the osteopaths we knew to meet on October 20th, 1900, at Dr. Hayden's office, 5th and Hill Sts., Los Angeles, to discuss the question of a permanent organization. The osteopaths of Los Angeles and adjacent towns responded to the call. Dr. Tasker was chosen temporary chairman; Dr. M. L. Parcells, secretary pro tem. The chairman appointed a committee of three, Drs. Hayden, Emery and Burton to frame a constitution. The secretary was directed to send ballots to every osteopath in the state for the election of officers, also a copy of the constitution for ratification, when we adjourned until Nov. 3d, 1901, to meet again at Dr. Hayden's office to complete the organization to be known as the Osteopathic Association of the State of California. The ballots previously sent out were counted which resulted in the election of the following officers:

President, Dr. D. L. Tasker, Los Angeles; First Vice-President, Dr. Effie Sisson, Oakland; Second Vice-President, Dr. J. S. White, Pasadena; Secretary, Dr. J. W. Hayden, Los Angeles; Treasurer, Dr. R. D. Emery, Los Angeles.

Trustees:—Dr. E. W. Plummer, San Diego; Dr. M. L. Parcells, Los Angeles; Dr. Ann A. Wright, San Jose; Dr. C. A. Haines, Sacramento; Dr. J. J. Pearce, San Francisco.

The constitution was ratified and placed on record, and after some informal discussion we adjourned subject to the call of the president.

On Dec. 1st, 1900, President Tasker called the Board of Trustees together. The principle question was a bill to be presented to the legislature, and whom we should send to Sacramento to look after our interests.

The trustees framed a bill that seemed for the best interests of the profession and submitted it to each member in the state for a general opinion, also asked them for a ballot, as to whom we should send to Sacramento, when the Board adjourned subject to call.

On Dec. 13th, President Tasker called the board together to put into action the result of our previous meeting. The consensus of opinion was that the bill framed was a good one, and that we send Dr. Tasker to Sacramento. The question of finances was to be considered, so the secretary was directed to ask for donations from the members to carry on the work (and right here I wish to compliment the members on their liberality. You all seemed to be on fire with enthusiasm and the result was a full purse.) After framing the bill, which gave the association power to appoint the State Board of Examiners, it was found necessary to incorporate. So steps were taken to incorporate our



association under the laws of California, when the board adjourned until Jan. 2d, 1901. Said meeting was simply a legal procedure to straighten up accounts and furnish Dr. Tasker with funds to carry on the work at Sacramento, when we adjourned to await the result. For sixty-nine long days we were kept in suspense with a possible show of victory, then probable defeat, but our measure carried, and every D. O. in the United States knows our victory. California has the best osteopathic law in the land, in that it gives absolute independence. And here we are tonight, the *first annual meeting*, with success marked on the first mile stone of our organization, which proves conclusively that in "union there is strength." Many of us may feel that the work is done and there is little need of further enthusiasm. True we have made an excellent start, but must continue with reinforcement in order to hold advantages already gained and to establish our outposts of progress farther on. Our bill, which was ratified by the last legislature has given us a good start, but we must expand or become dwarfed; we must develop osteopathy as other branches of science are developed; we must band ourselves together, and make our influence irresistible if we expect to hold first position in healing the ills of mankind. The work for the ensuing year must be on a broad scale; we must have state meetings, and a line of work mapped out for general discussion; we must inaugurate the subsidiary clubs for local help. Let us enter into the work with a vim that accomplishes great things.

It is our desire to have every osteopath, who comes to our state to become a member of our association. We are incorporated under the laws of the state, and our organization is authorized for fifty years and cannot die. \* \* \* \*

Next order of business after the secretary's and treasurer's report was the election of officers for the ensuing year. The result was that for, President, Dr. R. D. Emery, Los Angeles; First Vice President, Dr. Mary V. Stewart, Oakland; Second Vice President, Dr. Hattie M. Doolittle, Pomona; Secretary, Dr. W. J. Hayden, Los Angeles; Treasurer, Dr. W. D. Emery, Los Angeles.

Trustees:—Dr. Geo. F. Burton, Los Angeles; Dr. H. F. Miles, Sacramento; Dr. Warren Taylor, Los Angeles; Dr. E. W. Plummer, Redlands; Dr. Frank A. Keyes, Los Angeles.

After all business was transacted the president introduced that congenial soul, a man among men, a man whose very presence is an inspiration, Dr. Arthur G. Hildreth, of Kirksville, Mo., who spoke to us concerning matters vitally important to all. It seemed a revelation to the doctor to meet so many osteopaths at such a distance from the hub of the profession. He expressed himself freely and with much earnestness in behalf of our welfare and progress. He was much pleased with the good work done by our college here in Los Angeles; that the conscientious, enthusiastic, well qualified practitioners stood as monumental evidence and that his earnest desire was that we continue the good work with loyalty and fidelity, becoming men and women who stand for truth. He closed his remarks by laying the plans for a building at the World's Fair at St. Louis in 1903, to be used as a home for all osteopaths,

who might visit the fair. Everybody was enthusiastic over the plan, and pledged their loyal support. Other members followed with short interesting remarks, so on the whole we had a large attendance and a very enthusiastic time. Then by motion and second we adjourned.

W. J. HAYDEN, D. O., Sec'y.

## OSTEOPATHIC CAMPAIGN.

E. E. TUCKER.

### VII.

#### THE CLAIM.

OSTEOPATHY is a complete system. It is complete that is, so far as the powers of nature, upon and through which alone it works, are complete, or so far as they remain intact when the osteopath is called to the case.

If it is brought at the beginning, when the powers are complete but only suspended, the cure is usually not difficult; but the longer the wait, the more is nature exhausted, the more is the vital energy cut off and dead, and the more difficult is the cure. If, however, a sufficient vital basis is left, the cure is possible.

In this sense osteopathy is certainly a complete system, for it includes a knowledge of how to work upon and through the natural agencies for preserving and restoring health, or at least, enough of them to make the system practically and theoretically complete.

Thus, there are only two classes of functions in the body, vital and mechanical. (There are chemical functions which are rightly dependent upon the vital functions.) Of these, the vital are wholly beyond our reach; we know what they are, but certainly do not understand them and cannot intelligently help them.

Fortunately, it is not necessary to help the vital functions, for they never fail of themselves. Vitality is a quality inherent in the matter, or in the spirit of God animating it, and is as constant as the force of gravity and the laws of mathematics. As in the steam engine, the power of heat and steam and steel never fail, but some part may break, so the vitality or the vital functions, never fail, but may be made useless by a mechanical disorder.

The mechanical functions we do understand, pretty thoroughly. Thus, anatomy is a study of the structure and of the mechanical organization of the body. Physiology is a study of the functions, vital and mechanical; it is half mechanical. Histology is microscopic anatomy, physiology and pathology. Pathology, what we know of it, deals very largely with mechanical conditions. In so far as the mechanical structure can be regulated, the mechanical functions, and the vital functions which depend upon them, are not going to fail. That, then, is the point. How far can it be regulated?

Mechanical structure can of course be treated mechanically; but how far can this be done outside of the body? Upon this it turns whether osteopathy



is or is not a complete system, which can be relied upon in all classes of disease, acute and chronic, climatic and inherited.

For the osteopathist to claim that *he* regulates and readjusts these parts of the body, be his fingers ever so delicate, is for him to claim a skill equal almost to nature's own. The adjusting is done through nature's own powers—in this way:

The natural position is of course the easiest position; and if a part be twisted or knocked out of that position, every ligament, every bit of connective tissue will be on a stretch, straining to pull it back to its normal position. If it remains out, it argues that something is caught. What the osteopathist does is to uncatch it, and assist this tension to pull it back, and adjust it again. This must be done very gradually, to allow the parts that have been stretched time to resume their proper size. So far as these forces of the body are still alive, the cure can be effected, with sufficient skill.

Even when these forces are lacking, or when the catch cannot be uncaught, still, much can be done—but that is another story, for another time; there are few such cases.

Thus all its work is done through nature and her powers, and is complete theoretically so far as they are complete. In practice all depends on the skill of the operator.

### VIII.

#### NATURE'S EFFORT.

The osteopathist can heal nobody. This may sound startling coming from the osteopathic profession itself, but—the osteopathist can heal nobody. It is not he that does the healing. Osteopathy is a complete system because it is nature that does the healing. The osteopathist does but restore to nature the opportunity that was denied her when disease set in. So far as he can do this, he can be sure of the cure, for the powers of nature never fail. Disease is not an antagonist, needing to be conquered and driven out, it is merely the failure of some necessary process within the body; which failure must be due to its being prevented.

This is the way of it. The body is not an organization of *things*, it is an organization of *forces*. In its structure it consists of things, yet these things only exist for the sake of the forces they embody and represent. When a piece of steel is made into a hair spring, without ceasing to be steel, it yet becomes much more than a hair spring—a force. So far as the purpose of the watch is concerned, it is known only as a force. So the organs and other parts of the body are forces, so far as life is concerned.

Now the peculiar thing in case of the body is that these forces built for themselves the things, the structures, that embody them. Suppose, then, some part of the structure should be wrenched out of place; what would be the effect on the forces? They would of course be thrown out of harmony—would be deprived of the chance to work harmoniously, or perhaps to work at all;

disease is the name we give to the resulting condition. But immediately these forces which built it would set to work to right it. Two things they would do. They would try to pull the disordered parts back into order; and they would begin to accommodate themselves to the new conditions. If they fail in the first they try to complete the second, but always leave a weakness and become a drain on the strength. The first is called the tendency towards the normal; it is more, it is a strain towards the normal. The second might be called the attempt at compensation. These are the forces which the osteopathist endeavors to assist, working still and always upon and through the natural agencies. In assisting the first, he relies upon the natural tension of forces to find and maintain the correct position or shape, and himself merely uncatches what is caught and pushes it towards its goal.

In helping the second—but here some explanation is needed. Every body function can vary within rather wide limits, so as to adapt itself to external changes or to make compensation for them. The range of its variation can be greatly increased by training. Thus, the calibre of the blood vessels varies every time a drink of water is absorbed; and in firemen, for instance, who are trained to stand easily the rapid changes from heat to cold, must be able to vary greatly. When a new condition arises internally, instead of externally, all the functions attempt to compensate for the change in just the same way. If the change be extreme, the compensation will take time, meanwhile often a condition of disease will obtain.

Indeed, so great is nature's power of adaptation and compensation that it is found to be dangerous to restore old lesions suddenly, for this may create a condition of disease just as an original lesion may. If the forces have harmonized themselves to this structure, they will be thrown out of harmony by a too sudden change. It is always best to restore the original condition, though slowly; because however well nature has made the compensation—there is yet necessarily a weakness.

This process the osteopathist helps by supplying the necessary stimulation at the proper points. The body, and particularly the nervous system, is a creature of habit; and often continued stimulation to a nerve will induce the habit in the nerve, which may be kept up without the stimulus. Thus the osteopathist may help the system to form new habits, suited to the new conditions.

In every particular, the osteopathist works on and through the power of nature. There is no question that the powers of nature are, taken together, complete. According to his skill in employing or liberating them, therefore, the osteopathist offers practically a complete system.

### IX.

#### ADAPTATION AND RESISTANCE.

Truly, we are fearfully and wonderfully made. We—this wonderful organization of mud and intelligence in which we become we—that is our body, possesses a power which is wonderful above all other phenomena of a wonder-



ful nature; namely, the power to adapt to its own purposes both forces and food coming to it, whatever be their nature. It uses what it wants, rejects what it does not want, and makes them all over to suit itself—both forces and foods.

In other words, it appropriates food to its own purposes, whatever be the nature of the food and stimulus. This sounds very wonderful; but the truth really is, it is so ordinary, so accustomed to it that we have not noticed it, and so missed its significance.

For instance, one man eats codfish and hardtack, another hog and hominy; another eats rice and tea, and another blubber and candles; one man eats only vegetables, and another only meats; yet from all this diversity of materials nature makes a body so true to the universal pattern that even the course of arteries and the paths of nerves may be told the world over. Beneath the skin all men are alike.

Not only that, but from this same material she will manufacture alkali or acid, bone or blood whichever her needs are at the time.

One man is in contact with the chilling winds and salt spray of the fisheries, and nature seems to make use of the stimulus of it to help the work of thickening the skin and strengthening the heat making functions. Another man faces the hot dry winds of the arid desert, and this stimulus also is used to toughen the skin and strengthen the heat removing apparatus. So all through the category of human occupations—in the furnace room of the battleship, in the swamp, in the chemical laboratory, in the counting house—the same thing is seen, nature appropriating the stimuli of the place to help her in her own work and her own needs.

This subject is very extensive. We might instance the vibrations that we call light, traveling 186,000 miles per second—and the vibrations of sound, traveling in air 1090 feet per second—and the infinitesimally small vibrations of matter, known as odors—all these things are appropriated by the body to give it knowledge of its surroundings; are transformed, in the alchemy of vitality, into intelligence, according to the body's needs.

Of more practical interest is the fact that if we touch a hot stove, often long before we begin to feel the pain, nature has appropriated the stimulus of the heat to excite the muscles that pull our fingers away. If we go from a cool room to the heat of the sun, the stimulus of the heat is used in this instance to pour out perspiration and so on through a long list. All day and every day does this intelligent vitality appropriate from the forces of the air, earth and sun what it wants and can use.

Not only that, but it ignores or resists what it does not want. Stimulations of light, sound, friction, temperature, vibration, are pouring in upon us continually every minute of the day, yet only those of them have an influence whose influence the body needs or desires, until they pass the limit of the body's powers to resist.

If this be the case in health, how much more should it be the case in sick-

ness, when the body is using extra efforts and every opportunity to have the work done. In sickness, the limit or the power to resist is much more quickly passed, but the benefit of stimulation is also much greater and immediate. Disease is the need of stimulus—the lack of it. Disease is the cutting off of some normal force and hence the failure of some organ. By means of this power to appropriate, nature is able largely to make up the deficiency.

It is certainly natural for forces to flow through the channel that is empty, the channels of least resistance, so it is natural for stimulus to flow through the nerve and to the organ that is not being stimulated and is not working. This is proved every day of the osteopathic practice. The pneumogastric nerve, for instance, influences several scores of different functions; yet if only one of them be weak and the nerve be stimulated, the weakened organ only and its functions will be affected thereby—moreover, only that part of the organ which needs the stimulus will appropriate it.

Many thousand experiments have established this fact beyond dispute. The question then arises, how best to apply stimulus? The osteopath uses mechanical stimulation with the fingers, because he finds the body itself using such stimulus, hence it is a normal form of it. Electrical and chemical stimuli are more direct, but electrical is too strong to be transformable, as is seen in experiments, so is destructive; it passes the limit of the body's power to resist. Chemical stimulus is also a normal form of stimulus, found in many parts of the body, but is specific, is not transformable, and also passes the limit of the body's power to resist. Mechanical stimulus, on the other hand is normal, is easily applicable, easily transformable, general, and easily resisted. Moreover, through the reflex nervous mechanism, it is able to reach all parts and functions.

#### NEW YORK OSTEOPATHS MEET.

The annual meeting of the New York Osteopathic Society was held at the office of Dr. George J. Helmer, 136 Madison Avenue, New York, October 30, 1901, the whole day being taken up with business of importance and interest.

The society now has forty-two members of which twenty-five were present, while eighteen joined at this meeting. The following officers were elected:

President, Dr. Walter W. Steele, 356 Elliott Sq., Buffalo, N. Y.; Vice President, Dr. Albert Fisher, 414 1-2 S. Salina St., Syracuse; Secretary, Dr. Chas. C. Teall, 1252 Pacific St., Brooklyn, N. Y.; Treasurer, Dr. Chas. F. Bandel, 148 Hancock St., Brooklyn, N. Y. Directors: Dr. George J. Helmer, 136 Madison Avenue; Dr. Ralph H. Williams,

Chamber of Commerce, Rochester, N. Y.; Dr. Charles H. Whitcomb, 392, Clinton Ave., Brooklyn, N. Y.

The society voted to incorporate and adopted a new constitution and by-laws.

Among the resolutions adopted was one condemning sensational newspaper publicity, and another recommending that the course of study be extended over three years of nine months each, and asking the co-operation of other state societies to this end. It was voted unanimously to adopt, as a requirement for admission, the standard set by the American Osteopathic Association. Considerable pride is felt at being the first state society to take this step and the hope was expressed that other states would follow.

CHAS. C. TEALL, Sec'y.



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THE greatest men of history have been fighters. Osteopathy is schooling some great generals.

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SAM JONES says, "Massage is no more like osteopathy than currying a horse is like playing a piano." Sam knows. He has tried all four of the arts, his recent experience with osteopathy calling forth the quoted simile, characteristic of the famous Southern evangelist.

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THE recommendation of the Eastern politician who was cured by osteopathy, that the legislature of his state pass a law disbarring the medical doctors from practicing their so-called profession of healing, if followed out, "would," commented a wag, "strike an awful blow to the business of the undertaker."

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OSTEOPATHS who wish to practice in Kansas under the new law in that state will be subject to the following rule passed by the state board governing registration:

"Osteopaths with lawful qualifications can register on the same terms that medical practitioners can. They *must* have acceptable diplomas, or pass satisfactory examinations. Osteopaths must show at least four terms of instruction of not less than five months each in two or more separate years, to entitle them to examination."

This provision will protect Kansas from the "short term" and other fakirs that squeeze into some of the states owing to looseness of so-called medical legislation.

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THE medical journals all over the country view with alarm the skepticism that per-

vades the ranks of the leaders in "regular" medicine. As osteopathy spreads over the country the medicine doctors are more and more beginning to see the errors of their system of drugs and poisons and losing faith in their administration. The Eclectic Medical Journal of Cincinnati, comments: "It is not for us to say just what is the cause for this mistrust in their system of medicine. The physician who has no faith in his art has no place as a physician in our home. He is either out of place in his profession by reason of mis-education, mis-information, or is under-educated in lines in which he should be an expert. We furthermore know that the man who has no faith in the curative power of medicine is the man who does not know medicine, at least the fine touches that come to him who studies *in faith* the response that comes to properly administered remedial agents." The M. D.'s long suit never has been "faith."

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"Fake osteopathy," writes Dr. J. W. Dixon, of Fremont, O., to the JOURNAL, "quails before the genuine. The fakirs cannot cope with it but I voice the sentiments of the Vermont osteopaths in their protest against teaching osteopathy by mail, a la Chicago and a certain Cleveland fakir."

Dr. Dixon then follows with an account of his experience with the practices of a certain institution near the seat of his practice. He writes: "You will find enclosed an ad of a sanitarium run by parties claiming to give osteopathic treatment. From those that have come to me who have tried the other I learn that they received 'treatments' daily at one dollar each and were given a 'punching, thumping, pounding, pulling,' an assistant 'aking a hand in the melee, then they had a little massage and alleged magnetic healing thrown in without extra cost. One had received 150 treatments, another 125, another 35, and every one of them was the worse for the wear. Several had lost faith in osteopathy as the result of the fake foisted upon them. I told several of them that they had had no osteopathy as yet as far as I could learn and informed them that my system was the genuine as taught by the American School of Osteopathy at Kirksville, Mo., instead of the fake article sent out from

some alleged schools and by mail from Chicago and Boston and sundry other places. In conversation with the whilom self-styled osteopath connected with the advertised sanitarium, he asked me if he could pass an examination at Kirksville, hinting that he was able to pay a goodly sum for 'passing marks.' I replied, 'yes, I believe you could pass if you studied hard enough during the two years' course required by that institution, and showed in other ways that you were capable of properly representing them in the field.

"I afterward learned that he stated that the Kirksville school was one of least importance in the osteopathic field and ridiculed the idea of a diploma from a school of its vaunted world-wide reputation.

"There is room for all genuine osteopaths and the fakirs will all get up and 'git' in the presence of the genuine, although they do more or less harm before the people get on to them. I had the satisfaction the other day of having a medical doctor, the owner and manager of several sanitariums, call on me for treatment for a violent constitutional headache due to excessive smoking. I saw that it was necessary to be very thorough and I spent some time with him and left no part unexplored. I had the satisfaction of hearing him tell his wife after the treatment 'I am better!' He informed me that he had tried numerous remedies without relief and that he decided to try osteopathy and was glad he had.

"I have been very busy and am well pleased with the outlook in my field."

### Dr. Nat H. Shackleford Dead.

Dr. Nat H. Shackleford, a graduate of the American School of Osteopathy, June class, 1900, died at the home of his mother in Lewistown, Mo., Wednesday, Nov. 13th. Death was caused by typhoid fever. He was twenty-four years of age and a remarkably brilliant young man. Soon after graduation he located in Nashville, Tenn., where he was associated in practice with his brother, Dr. Rufus Shackleford. His wife and a little daughter survive him. As a student here he was popular with all members of the school.

Lindsay and Blakiston's annual little visitor, "The Physician's Visiting List," P. Blakiston's Son & Co., publishers, has been received on the JOURNAL table and as its predecessors have been, the book for 1902 is a gem. It has several features that especially commend it to the osteopath, containing as it does several pages of tables and other information to which one has occasion for almost daily reference. The books are convenient size for the pocket and are neatly bound in leather. The several editions sell from \$1.00, up to \$2.25, depending upon the arrangement of the contents.

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The third and fourth volumes of Cohen's "System of Physiologic Therapeutics" have been received by the JOURNAL. The first part of volume three treats of the factors of climate, with their effect on physiologic functions and the pathological conditions, and describes the fundamental principles that underlie the application of climates, health resorts and mineral springs in the prevention of disease, and to promote the comfort and recovery of the sick. The second part describes health resorts; and the third part discusses in detail the special climatic treatment of various diseases and different classes of patients. Volume four describes the health resorts of Africa, Asia, Australia and America. In volume three ocean voyages are treated with considerable detail and their advantages and disadvantages, indications and counter-indications as a therapeutic measure, are pointed out. The subject of altitude is treated in a full and definite manner; The difference between summer and winter climates and the therapeutic indications for the different seasons are discussed at length. Not only geographic and climatic features are pointed out, but also social and other characteristics so important in selecting a resort that shall be suitable to the tastes and means of the individual are given. The volumes are illustrated with maps. P. Blakiston's Son & Co., Philadelphia, publishers. Price of complete set \$22.

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For Sale.

A practice in a large Eastern city. Office is in the best location in the city and ele-



gantly furnished. Operator is the best known osteopath in the city and has a practice that is built entirely on good results. His only reason for selling is the ill-health of his wife. Will exchange practice for Denver one or will sell at a sacrifice with privilege of paying for it out of the practice, a part only in cash.

For full particulars address Dr. X, care of JOURNAL OF OSTEOPATHY, Kirksville, Mo. Only those who mean business are asked to investigate.

#### Freshmen Notes.

Outside of a whole lot of hard work there has been little going on in the class during the last month. There certainly has not been a wedding to cause a ripple of excitement, the Juniors and the Sophomores having the best of us along that line.

A class meeting was held last week in November but there was "nothing doing" with the exception of the adoption of a class yell. Ye Freshmen will hereafter be expected to make themselves known by yelling the following on occasions that will permit of its use:

He, hi, hite, scarlet and white,  
Can't you see, we're all right,  
Rip, rah, ree, who are we?  
We're the June class nineteen three.

Quite a delegation of freshmen took in the excursion to St. Louis Nov. 15, and did valiant service in the rolls of rooters on the Christian Brothers' campus during the game between the osteopaths and the C. B. C. The spare time in the city, the railroad agents having arranged many special "extensions," was put into advantage in seeing the sights and special theatre attractions in the metropolis of the state.

A review of the work in chemistry commenced the first week in December and not a small bunch of us are hopeful that some of the clouds that obscure that branch of our troubles will disappear. Here's hoping they will at any rate.

H. A. Downs, A. N. Ovens and Arnold Lindsay of the class attended the Y. M. C. A. state convention at Columbia the third week in November.

The class voted by a unanimous vote for the vacation on Friday after Thanksgiving,

the demonstration in the amphitheatre when the question was brought up, being of an enthusiastic character. The class regretted to go on record against Prof. Laughlin, who did want "school," but under the circumstances, having had a slight tip confidentially on the side, felt warranted in going to a man for "no school."

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#### Sophomore Notes.

Mrs. E. C. White has been absent from school several days on account of illness.

According to Dr. Laughlin, Miss Stravens drew the turkey and Miss Barr the chicken.

Frank Walker and M. V. Miller spent Thanksgiving in Memphis, Mo.

C. E. Shifflet's mother of Grinnell, Iowa, is here visiting. She has been a visitor at the A. S. O. a number of times.

On account of the excellent playing of S. W. Miller, he has become a member of the first eleven in football.

The following members of the class joined the Y. W. C. A. at its last meeting: Misses Henderson, Edwards, Swartz, Stanely, Hallam, Aplin and Mesdames Francis and Hemstreet.

Miss Essie Boyd of Centralia, Mo., was married recently to Dr. Allen of Middle Grove, Mo. Miss Boyd has been out this term but we had expected her to return in February.

Miss Minnie Stanley spent several days in Stronghurst, Ill., during the present month, visiting her parents, who since then have moved to another portion of the state.

Miss Gail Bowes, we regret, cannot continue in school on account of ill health. She and her mother will soon leave for Ohio, where they will reside.

The Misses Ford and Tracey have been playing golf this season. They mastered the vocabulary in an extremely short time, and are now prepared to explain to any one, the difference between a hazard and a four-some.

Among the "Sophomore Indians" who attended the game in St. Louis, between C. B. C. and A. S. O. were: Mr. and Mrs. Hemstreet, Mrs. White, Misses Brown and Morelock and Messrs. Miller, Shifflet, Wolf, Coon, Cramb and Parrish.

One Monday morning recently, every one

was greeted with the words, "Have you heard of the wedding?" When we found that one of our own number, J. Elliot Smith, had married one of the third term girls, every one was interested. Of course, every one assisted Mr. Smith in responding to roll call, that is, in all except in Dr. Laughlin's class. Just as every one was prepared to answer "here," when Mr. Smith's name was reached in anatomy, Dr. Laughlin with malice aforethought, skipped Mr. Smith's name. The class evened things up however, at the close of roll call, by singing, "Mr. Smith is here."

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#### Senior Notes.

DENNA DUFUR.

Mrs. Purdom was absent several days last month on account of sickness.

J. A. McKee spent Thanksgiving in Des Moines, Iowa, visiting his brother.

Tindolph thinks there is a golf center in the brain and that those who do not care to play golf have not had their minds fully developed.

Our president, T. J. McGuire, is with us again after experiencing the dislocation of a hip and the attending "extras" which caused him to be absent several weeks.

Mention should be made of the large number of interesting cases brought before the clinic class during the last month. We have been fortunate indeed and Dr. Hazzard deserves great praise for his efforts to secure good cases and also for the instructive manner in which he has presented them.

The oft heard remark "I have no time to play football" has again been proven a fallacy. Illinski and Davis the two best "ends" in Missouri, if not in the West, have played on the A. S. O. football team since their freshman term and still the Seniors can boast of no better students as their class work has been exceptionally good. Illinski is still nursing a sprained knee which was "handed" to him in the last line up.

Not long since the Senior class, or at least certain members of it, were censured for their disorderly conduct and lack of attention during one of the lectures, and while this occurrence was due to thoughtlessness and not disrespect on the part of the students, we deserved the "calling down" and fully

realize that an instructor cannot put forth his best efforts without the sympathy of the class. Henceforth our conduct will be such as to place us above criticism.

All doubt, if any existed, of the "old doctor's" ability to back up his remarks by practical demonstrations, was removed last week. The "old doctor" was discoursing upon the treatment of epilepsy, when fortunately or unfortunately, one of the occupants of the room who is subject to epileptic attacks, and whose case has so far baffled the other doctors, was taken with the spasm peculiar to that disease, but by skillful treatment applied by the "old doctor" the attack was aborted and the man regained consciousness in less than thirty seconds.

#### Junior Notes.

C. H. Hammond has returned to school after a pleasant visit to his home in Illinois.

G. E. Beers has again taken up his class work after having passed through a serious attack of pneumonia.

We are glad to announce that Miss Gladys Armour, one of our brightest students, has recovered from quite a prolonged illness and is again with us.

The little son of our esteemed classmate, E. C. Link, who was severely bitten by his pet dog is rapidly improving. The dog has since visited the dissecting room.

The Junior class was thrown into a state of much confusion a few mornings since upon learning that Miss Anna Miller, one of our amiable classmates, had been married since the 14th of September last, to Joseph Smith, a member of the Sophomore class. They kept their secret pretty well, but in an unguarded moment the facts leaked out to the great surprise of their many friends. All Juniors join in wishing them a "happy and prosperous journey along life's perilous pathway."

G. C. Maxwell, who is one of the shining lights of our class, is also a firm believer in dreams. He dreamed a few nights since that he was afflicted with a floating kidney, which on being removed from his body (through the saphenous opening) was found to contain a watch chain fastened at one end of it, and now Maxwell is wondering whether or not it will ever come true.



## PERSONAL MENTION.

Dr. W. L. Gardiner, recently of Salida, Col., is now located at Creston, Ia.

Dr. J. F. Harlan is now established in practice at 627 State street, Springfield, Mo.

Dr. Orella Locke, formerly of El Paso, Texas, is now located at Canon City, Col.

Dr. George E. Graham, formerly of Wellston, O., has located at 503 Fifth Avenue, New York City.

Dr. John C. Herman of Magnetic Springs, O., has opened a winter office in Daytona, Fla.

Dr. O. Y. and Elizabeth Yowell, of Chattanooga, Tenn., have moved their offices from Temple Court to Suite 66, Times Bldg.

Dr. James H. McGee has sold his practice at Manchester, Ia., to Dr. E. B. French. Dr. McGee will locate at Clarinda, Ia.

Dr. Benton Gentry and Wilmot Reed have formed a partnership for practice at St. Joseph, Mo.

Dr. Anna Hadley announces the removal of her office from 356 Schermerhorn street to 80 Hanson Place in Brooklyn, N. Y.

Dr. A. G. Hildreth, who is in California on a short vacation, has written to the JOURNAL that he expects to return to Kirksville the first of the year.

Dr. Charles C. Teall has changed his offices in Brooklyn, N. Y., from 80 New York Avenue to "The Regina," Nostrand Avenue, corner Pacific street.

Dr. D. Arthaud of Burlington, Ia., has changed the location of his offices in that city from 523 Division street to 312 Tama building.

Mrs. G. M. Brewer, D. O., formerly of Terre Haute, Ind., has formed a partnership with Dr. J. S. Crawford of Dallas, Texas, for the practice of osteopathy.

Dr. Clarke Francis Fletcher has resumed his practice in New York City. After having spent a very successful season at Lake George, N. Y., he is now located in the Jerome building West 116th St., Harlem.

Dr. J. R. Zimmerman of Newark, O., has changed his office quarters from 56 North Second street to Suite 5, the Avalon, 96½ West Main street. He reports a good practice.

Dr. Charles H. Conner has disposed of his practice at Butler, Mo., to Harriett Frederick, D. O. Dr. Conner will locate in Albuquerque, New Mexico. He goes there with the intention of permanently locating in the state but anticipates a declaration of war on the part of the medical board immediately.

The following alumni visited the A. S. O. during the last month: Drs. Charles Cleary, Russell Springs, Ky.; Earl Jones, Ft. Madison, Ia.; E. M. Knox, Eddyville, Ia.; O. C. Seibert, St. Joseph, Mo.; Walter Dobson, Utica, N. Y.; Eva Douglas, Emporia, Kan.; M. E. Ilgenfritz, Storm Lake, Ia.; Rufus Shackelford, Nashville, Tenn.; A. P. Terrell, Carrollton, Mo.; Charles H. Conner, Albuquerque, New Mexico; J. F. Byrne, Ottumwa, Ia.; E. E. Giltner, Oklahoma City; Charles Campbell, Palmyra, Mo.; T. P. Berger, St. Charles, Mo.; George Chappell, Sidney, Ia.; David A. Spear, Utica, N. Y.; J. W. Shackelford, Gainsville, Texas; R. E. Jameson, Manistee, Mich.

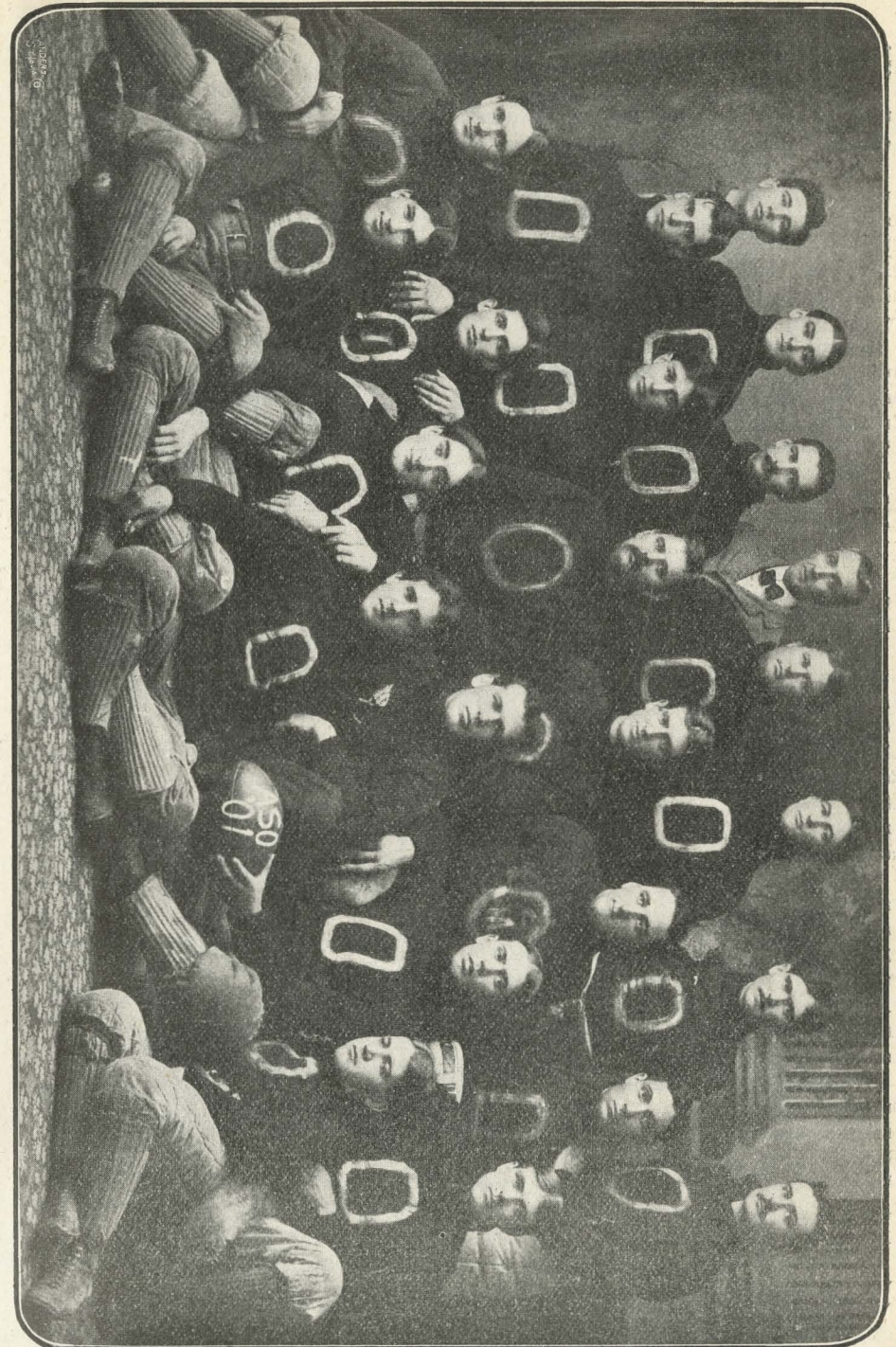
## Athletic Notes.

E. C. WHITE, M. D., DIRECTOR.

|           |          |     |                     |      |
|-----------|----------|-----|---------------------|------|
| Sept. 18— | A. S. O. | vs. | All Kirksville      | 11-0 |
| Sept. 23— | "        | "   | St. Joe Medics      | 46-0 |
| Sept. 28— | "        | "   | Univ. of Nebraska   | 0-5  |
| Oct. 5—   | "        | "   | Univ. of Missouri   | 22-5 |
| Oct. 12—  | "        | "   | Univ. of Kansas     | 6-17 |
| Oct. 19—  | "        | "   | Haskell Indians     | 6-36 |
| Oct. 26—  | "        | "   | Gem City B. Col.    | 40-0 |
| Oct. 31—  | "        | "   | Tarkio College      | 28-0 |
| Nov. 4—   | "        | "   | Ottawa Univ.        | 39-0 |
| Nov. 9—   | "        | "   | Highland Park Col.  | 64-0 |
| Nov. 15—  | "        | "   | C. B. C. St. Louis  | 11-6 |
| Nov. 20—  | "        | "   | Texas University    | 48-0 |
| Nov. 28—  | "        | "   | Mo. School of Mines | 58-0 |

The season of 1901 has been a very successful one and leaves the A. S. O. team the undisputed champions of Missouri. They have played and defeated five of the strong teams of the state. An effort was made to arrange games with other of the state teams but without success.

Washington University was defeated by the "Kansas City Medics" 28-0. The Kansas City Medics were beaten two games by



A. S. O. FOOTBALL TEAM—CHAMPIONS OF MISSOURI FOR 1901.

Photo by Moore



Ottawa University 6 to 5 and 17 to 0. We defeated Ottawa 39-0.

Warrensburg State Normal team was defeated by the Pierce City Baptist College while the Pierce City team lost to Rolla.

St. Louis University cannot claim the pennant, they have not played a single first-class team this season. They have only won from High Schools and third-rate colleges. But, if they really think they have a chance the osteopaths will play them a post-season game.

The one unpleasant feature of the season, out side of losing to Kansas University, is the effort being made by "Dr." (?) Hetherington of Missouri State University, and Foster of Kansas, to have the football team of the A. S. O. boycotted by the university teams in this part of the West. An interview with them was published in the St. Louis and Kansas City papers. In this they claimed that Iowa, Nebraska and the Haskell Indians had combined with Kansas and Missouri.

It seems that these gentlemen, Hetherington and Foster, are not anxious to establish any record for fairness in sports. Foster was forced by Prof. Dobson before the Athletic Board at Lawrence, Kansas, to take back a number of untrue statements. Any statements made by either Hetherington or Foster in relation to the A. S. O. are pretty sure to be a rank fabrications.

There is no place in the country that treats visiting teams better than does Kirksville and the A. S. O. We have statements from all the visiting teams commending the treatment. Just think of Foster's nerve to claim ill treatment in Kirksville after sending us a letter praising our treatment of him and his team.

The results of the games this season demonstrate that the style of play used is the equal or superior of that played by any team in the country. It gets more men into the interference without taking the men out of the line. The latter procedure allows the play to be piled up before reaching the line.

Following is a list of the men who have played this season, giving weight, position, height, age, and designating those who graduate in February or next June:

| NAME.       | W't. | Pos.    | H't.      | Age | Gr. |
|-------------|------|---------|-----------|-----|-----|
| Crowley     | 162  | F. B.   | 5 ft 9½   | 24  | No  |
| Van Dorn    | 202  | R. H.   | 5 ft 11½  | 22  | No  |
| Craig       | 194  | L. T.   | 6 ft      | 25  | No  |
| Malone      | 160  | L. G.   | 6 ft      | 20  | No  |
| Johnson     | 142  | Q. B.   | 5 ft 6    | 25  | No  |
| Cain        | 156  | R. T.   | 5 ft 10½  | 22  | Yes |
| Higsby      | 180  | L. H.   | 6 ft      | 24  | Yes |
| Davis       | 145  | R. E.   | 5 ft 7    | 23  | Yes |
| Illinski    | 145  | L. E.   | 5 ft 8    | 23  | Yes |
| Turfler     | 167  | R. G.   | 5 ft 10   | 23  | Yes |
| Miller      | 163  | L. G.   | 5 ft 8    | 27  | No  |
| Crabtree    | 158  | C.      | 5 ft 4    | 20  | No  |
| Reese       | 160  | F. & H. | 6 ft ½    | 26  | Yes |
| Fowler      | 163  | H.      | 5 ft 8½   | 21  | Yes |
| Moore       | 161  | E.      | 5 ft 10½  | 22  | No  |
| Cleary      | 247  | G.      | 6 ft 1 in | 27  | Yes |
| Coons       | 178  | G.      | 5 ft 7½   | 25  | No  |
| Hunt        | 147  | E.      | 5 ft 8    | 18  | No  |
| Downey      | 156  | E.      | 5 ft 6½   | 24  | No  |
| Mahaffey    | 165  | T.      | 5 ft 8    | 26  | Yes |
| Gable       | 220  | C.      | 5 ft 10   | 31  | Yes |
| Cramb       | 150  | H.      | 5 ft 4    | 18  | No  |
| Avg. of sqd | 174  |         | 5 ft 8¾   | 24  |     |
| Avg of team | 163  |         | 5 ft 7½   | 23½ |     |

I don't want to mention any man or men as especially good players for foot ball is essentially a team game, and every man must do the work assigned him or the play fails. The men learned by bitter experience that team work is necessary for successful football, and no team in the country could possibly get more men into the plays and assist the runner more than was done during the latter part of the season. Prof. De Graff of Highland Park College said, it was the best football he had ever seen and that we could easily defeat any team in Iowa.

#### Tarkio College Game.

This was very nearly the same team that held the University of Nebraska down to five points last fall and a hard game was expected. Van Dorn was unable to be in the line up. Cramb took his place and did finely. Tarkio gave the boys a hard game but the victory was never in doubt. Almost all of the substitutes were used in the second half and they did well.

#### Ottawa University Game.

The Ottawa team came to Kirksville with the expectation of winning, for they had beaten Kansas University 17 to 6 and Kansas with the help of a ringer won from the A. S. O. But Ottawa had not taken into consideration the great improvement in the osteopaths.

Ottawa won the toss. A. S. O. kicked off to the 10-yard line. The ball was brought back 10 yards. Ottawa then tried their favorite tandem play which had been so successful against other teams, but it failed to gain. The ball went to the osteopaths on downs. The ball was then carried towards the Kansas' goal by furious attacks on tackle and end. The interference was perfect. Every man was into every play, and the runner was pulled along many yards after being tackled. Such football proved too much for Ottawa and every play yielded five yards or better. The Baptists' were never able to make the required five yards, while the osteopaths were never held for downs. Ottawa had previously defeated the strong Kansas City Medics 6 to 5 and 17 to 0.

#### Highland Park College Game.

This game is best described by the word "overwhelmed." Highland Park had one of the best second class college teams of Iowa but was unable to cope with the high grade football of the A. S. O. The college men were of the opinion that the osteopaths could defeat Drake University 30 to 0.

#### C. B. C. Game in St. Louis.

This game was noted for the star work of one of C. B. C.'s best men—Clark, coach of Washington University, in the capacity of an official. He penalized the Kirksville team 12 times in the first half holding the score down to 11 points. In the second half many subs were put in to save the men for the Texas game which was to come off four days later. The diet or water disagreed with the men and they were all very weak. It looked at one time as though the official, opposing team and diet or water was going to prove too much. The score would have been over 40 for the A. S. O. under fair conditions.

Rolla had defeated the Christians 24 to 0.

#### University of Texas Game.

This team came here with the record of not having been defeated for two years. It had beaten the Missouri State University 11 to 0 and was expecting to win a hard game here. The coaches acted as officials and there was not a single dispute to mar the game. A Texas press representative from

Austin was here and sent messages every four minutes back to the university. He said it was the best, cleanest and fastest football he had ever seen. He said that the defeat was explained by the style of football used by the osteopaths, and that it was simply perfect.

A. S. O. won the toss, and after the second play it could easily be seen that the men from the Lone Star State were outclassed. The osteopaths played so fast and furious, that often a number of the Texas men were lying on the ground when the play started.

In the first half 36 points were made. Time was called with ball in A. S. O.'s possession on Texas' 5 yard line. In ten seconds more time the score would have been 42.

Texas had the ball three times in the first half but was unable to make the five yards.

In the second half Texas hoped to be able to score, but was held for downs and a touchdown made by the A. S. O. in four minutes of play. Another touchdown was made and goal kicked. After fifteen minutes of the second half was up, with the score 48 to 0, the Texas team asked to have the game called which was done. The A. S. O. team was perfectly fresh and could easily have made three more touchdowns which would have made the score over 60. Johnson kicked all the goals.

Kansas, the next Saturday, had a good deal of trouble in defeating Texas, only making two touchdowns in the last six minutes of the play on Texas' fumbles. Score, Kansas 12, Texas 0.

#### M. S. M. Game.

Rolla came to Kirksville with only one defeat against them. Washington University won against the School of Mines Saturday, Nov. 23d, score 17 to 6. Rolla had defeated C. B. C. 24 to 0.

Thanksgiving day was an ideal one for football while the crowd equalled the one at the Indian game.

The coaches of the two teams, White of Kirksville, and Wadsworth of Rolla, officiated. Length of halves 28 minutes.

Kirksville won the toss and chose the south goal. Rolla kicked off to 35 yard line; ball was brought back 10 yards. Davis fumbled. Rolla's ball on A. S. O.'s 45 yard line. They



tried the right side of line twice with the resulting gain of one yard. Rolla kicked 30 yards. Johnson lost the ball. Rolla's ball on A. S. O. 10 yard line. Held on downs. The osteopaths commenced the fast and furious play which always runs up a large score. Gains were made as follows: Davis 25 yards, Van Dorn, 5; Craig, 4; Van Dorn, 25; Cain, 2; Bigsby, 6; Craig, 9; Cain, 2 1-2; Illinski, 1; Bigsby, 6; Craig, 9; Cain, 2 1-2; Illinski, 1; VanDorn, 2; Davis, 5; Illinski, 9; Bigsby, 2 1-2; VanDorn, 5; Bigsby, 3 and over for a touchdown.

The above fairly represents the rate of play of the osteopaths. Rolla had the ball six times in the first half but was unable at any time to make the required five yards in three downs. Three touch downs were made and three goals kicked in the first half. Score 18 to 0.

The second half showed better work on the part of the osteopaths and a score of 40 was made. Total score 58 to 0.

The star play of this half was made by Bigsby who got the ball on a fumble 3 yards back of the line and carried it eight yards with four Rolla men hanging to him. With only 1½ minutes to play at the close of the second half VanDorn (Capt.) suggested calling the game. The Rolla team was willing but their coach objected and made them play it out.

It was the M. S. M.'s kick off. Kirksville made up her mind to get another touch down to pay the Rolla coach for his persistence. Rolla kicked off. The ball was carried over for a touch down in just seven plays raising total score from 52 to 58.

Rolla in fourteen attempts to carry ball from scrimmage made 11 yards and was thrown back for a loss twice, total loss 7 yards. Rolla's total gain was four yards in fourteen plays.

Following is the number of yards gained by each man on the osteopath team with number of times having ball, and average gain per down:

| Players        | yds gained | No. tries | Average gain |
|----------------|------------|-----------|--------------|
| Craig          | 128        | 21        | 6            |
| Turfler        | 18         | 4         | 4½           |
| Cain           | 94         | 18        | 5            |
| Davis          | 144        | 20        | 7            |
| Johnson        | 36         | 3         | 12           |
| Bigsby         | 115        | 19        | 6            |
| Crowley        | 133        | 13        | 10           |
| Van Dorn       | 182        | 18        | 10           |
| Illinski       | 94         | 8         | 11½          |
| Moore          | 45         | 6         | 7½           |
| Reese          | 45         | 5         | 9            |
| Total per team | 1034       | 135       | 9            |

| Rolla—            | Line up of Teams | —Kirksville     |
|-------------------|------------------|-----------------|
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| Moore             | R. G.            | Turfler         |
| Gratiot           | L. G.            | Miller, Coons   |
| Moll, Hovel       | R. T.            | Cain            |
| Wilder            | L. T.            | Craig           |
| Perrier           | R. E.            | Davis           |
| Shockley          | L. E.            | Illinski, Moore |
| Gregory           | Q. B.            | Johnson         |
| Ried, Pomeroy     | R. H.            | Van Dorn        |
| Southgate, Morgan | L. H.            | Bigsby          |
| Prugh             | F. B.            | Crowley, Reese  |

A sensational press report was sent out from Kansas City during the middle of November to the effect that Missouri, Kansas, Iowa, Nebraska and Texas universities had declared a boycott on the A. S. O. in football. There is no evidence that the boards of any of the universities were consulted, and none that several of the university managers reported to be principals in the "boycott" had had a hand in the press story sent out. The story emanated from the fertile imaginations of Hetherington, of Missouri, and Foster of Kansas. The Missouri University man still smarts under the stings of the way he was shown up before our game at Columbia, which were not soothed any by the drubbing we gave his team on Rollin's field that afternoon. Foster of Kansas has also made an unenviable record for himself. He was the man that played White, the giant ex-Washburn guard, under an assumed name in the Kansas line-up against the osteopaths, one of the most unsportsmanly acts that has ever disgraced western football. We caught Foster in the trick and now he further lowers himself as a sportsman by attempting to concoct conspiracy against the osteopaths. He and Hetherington are welcome to get out of our class. In fact they have that invitation. But we will protest against any carrying of their "dirt" in football into the relationships that exist in athletics between the A. S. O. and other universities. The following letter received from Coach Knipe, of the Iowa University by Dr. C. E. Still is self explanatory and illustrates the kind of tactics to which Hetherington and Foster will resort: "In reply to your favor written yesterday would say that this is the first intimation of any boycott against your school that I have heard of. The newspaper account is absolutely without foundation from any official source here and I regret you have had any annoyance on account of it. With best wishes for your future success, believe me, very truly yours,

"ALDEN ARTHUR KNIPE."

## Clinical Reports.

REPORTED BY DR. ORELLA LÖCKE, ROOMS 1 AND 3, RECORD BLOCK, CANON CITY, COLO.

### Acute Entero Colitis:—

On October 28th, I was called to see a child six months of age who was in the latter stages of acute entero colitis following an unrecovered attack of cholera infantum. The child had been under medical attention for seven weeks. It had grown weak and very much emaciated. Some half dozen kinds of food had been tried, none of which could be digested. There was an alarming diarrhoea and occasional vomiting. The stools were green, containing at times traces of blood and much mucus. The skin was hot and dry. The spine was very markedly contracted and posterior from the middle dorsal to the sacrum due very probably to the manner in which the child had been carried about by a young and unqualified nurse. My prognosis was very guarded. I feared the child was too weak and emaciated to recover. I gave a very strong treatment of the spine and stimulation to the pneumogastric nerve. I then gave a warm enema to cleanse the bowel and a drink of two or three ounces of warm boiled water to cleanse the stomach. This I followed with a warm bath, then dipping my hand in cold water I cooled the head, chest and back. I then suggested as to diet the undiluted milk of a cow having a very young calf. I advised only two teaspoonfuls to be given every hour, freshly milked each time of feeding so as to have the correct or animal temperature. The quantity was very small as you note but it was my belief, which was verified in a subsequent passage, that even this amount could not be perfectly digested at first. The parents said, "It cannot digest the smallest particle of milk." I assured them that it could with the treatment. They then complained that the quantity was so small as to starve the child to death. I again assured them that its thriving depended not on the amount taken into the system but on the amount which the weakened organs, brought gradually into activity by the treatment were able to digest. On the second day it was able to digest this small amount quite well. On the third day its fever was entirely gone and I increased the amount of milk given to three teaspoonfuls. On the fourth day we gave four and the fifth day five which was exactly one ounce. For the following four days I increased the amount one half ounce and extended the time one quarter of an hour each

day making the quantity on the ninth day, three ounces every two hours.

By this time there were none of the symptoms manifest. Digestion was perfect and the child was sleeping well and gaining markedly. I continued treatment until the twelfth day increasing the amount of milk given only one half ounce more. Then with instructions to the nurse to be very careful not to allow the child any strain of the spine I dismissed the case as cured and there has been no further trouble. In this case remembering the suggestions of Dr. A. T. Still during my clinical course at the American School of Osteopathy, I advised giving the child a piece of breakfast bacon to suck occasionally. This the ordinary M. D. would probably speak of as a "grandmother's notion" but be it whose it may there is philosophy in it. The fat not only aids in healing the bowel but also nourishes the child in the digestion of the casein.

### Winter Cholera:—

When located at El Paso, Texas, I treated a case of severe, gushing diarrhoea, almost black in color, accompanied by a secretion of liquid, remarkable in quantity, from all the orifices of the body. On physical examination I found a depressed sacrum, flattened pelvis, clubbed spinous processes in the lower dorsal and upper lumbar regions and the general contour of the spine remarkable for its absence of natural curves. Under treatment the attack lasted only a few days and though very weakening in its effects the patient rapidly regained strength. The patient was very much emaciated and seemed subject to these attacks.

In that locality a disease of like description was known as winter cholera and was said to be very prevalent in the far South.

The lady said that she recovered from the attack more rapidly under the osteopathic treatment than any other she had ever had. Can any one give me any information in regard to this disease or where I may find a description of it?

\*\*

REPORTED BY H. H. SMITH, D. O. OLDS, I.A.  
Acute Nephritis:—

Child five years of age was taken very sick at night. M. D. was called but away, so parents called me in the morning. I found the child in a stupor, extremely hot over left kidney, urine passed every thirty minutes, temperature on back over kidney



102 1-2, did not take temperature in mouth but it must have been quite high, muscles badly contracted over kidney region with 11th and 12th dorsal slightly to the right. Diagnosis, acute nephritis. I relaxed the muscles, eased up tension at 11th and 12th. I came back in four hours and found temperature 100 1-2, child conscious but fretful, went after the kidneys again, also cervical region. In twenty-four hours the child was entirely relieved from the attack.

#### Inflammation of Stomach:—

Called seven miles to the bedside of a young man who had been sick four weeks. As near as I could learn he had la grippe at first and the doctor gave him something disagreeable. After taking it he ran screaming around the room calling for water. His stomach could take no more medicine so the doctor let him go. Then the old German ladies took him in hand and tried to poultice him out of it, even tried to "witch" him out of it but it didn't work. On arrival I found him in a dangerous condition, temperature 104, pulse 129, he was suffering intensely. I asked what he had had for dinner; they said he felt like he had a little appetite so they gave him cold slaw with vinegar and sour cream. He had a case of severe inflammation of the stomach. Treated him for some time and relieved pain. I came back in the morning and found him much easier, temperature 100. Had him up in three treatments (3 days.) Now the people in that vicinity are much pleased at the results obtained by osteopathic treatment.

\* \*

REPORTED BY DR. T. M. SCHOFIELD, MARION, ILL.

#### Cataract:—

Mr. J. C. Martin, aged about sixty-two, after consulting two prominent M. D.'s. came to my office and asked, "Can osteopathy do anything for my blind eye?" Both the physicians had told him it was cataract and the only thing that would do him any good would be an operation.

Upon examination I found him totally blind in the right eye. The lesions were at the atlas and second dorsal, with soreness and muscles contracted in the cervical region on the right side.

The treatment, besides the removal of the lesions, was directed to relieve the soreness and contracted muscles. I also treated the terminals of the fifth nerve. After fourteen treatments his sight had returned and he could see nearly as well out of his right eye as his left.

It has been three months since the treatment. Now there is no difference in his eyes and he is able to read fine print with his "blind eye."

REPORTED BY E. L. LONGPRE, D. O., BATTLE CREEK, MICH.

#### Bell's Paralysis:—

A man 59 years old had been suffering with Bell's paralysis for one year. Examination showed lesion in upper cervical region. Lesion removed and man was entirely cured after third treatment.

#### Goitre:—

Neck measured 14 3/4 inches at beginning of treatment. At the end of the third week it measured 13 1/2 inches. Left clavicle down.

#### Neuralgia:—

Two molar teeth on one side of inferior maxillary had been sore and pained patient for over a year. Dentist had treated them and an M. D. had also treated them for neuralgia. Examination showed inferior maxillary slightly dislocated. First treatment removed cause and the trouble disappeared.

#### Laryngitis:—

Child 3 years old had suffered with laryngitis for nearly two years. A week's treatment removed cervical lesion and with it the cough.

\* \*

REPORTED BY DR. D. AIRTHAUD, BURLINGTON, IOWA.

#### Rheumatoid Arthritis:—

A child fifteen years of age had been run over by a wagon when she was nine years old. Had suffered a severe attack of inflammatory rheumatism and in March 1900, was taken to Rhode Island hospital at Providence, R. I. Three M. D.'s called previously had diagnosed the case as St. Vitus dance." At the hospital she had convulsions and the doctors had no hope of saving her. Ether was administered, and many grains of morphine were injected into the child during her stay at the hospital. No improvement. All M. D.'s said "no help for her." Parents then had electricity, massage and other methods tried, but to no avail. When brought to me her tongue was paralyzed. She had spasmodic jerkings of face and limbs, caused largely no doubt by arsenic and strychnine in her system. I found seats of trouble at the axis, fourth dorsal and first and second lumbar and a slipped innominate and three ribs on the left side were down. After ribs were set the heart action which was previously much disturbed showed marked improvement. After one month's treatment she is rapidly recovering. Her powers of speech have returned and her other physical ills are disappearing. Parents of child gave to the local press complete history of case with splendid tribute to osteopathy.

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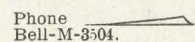
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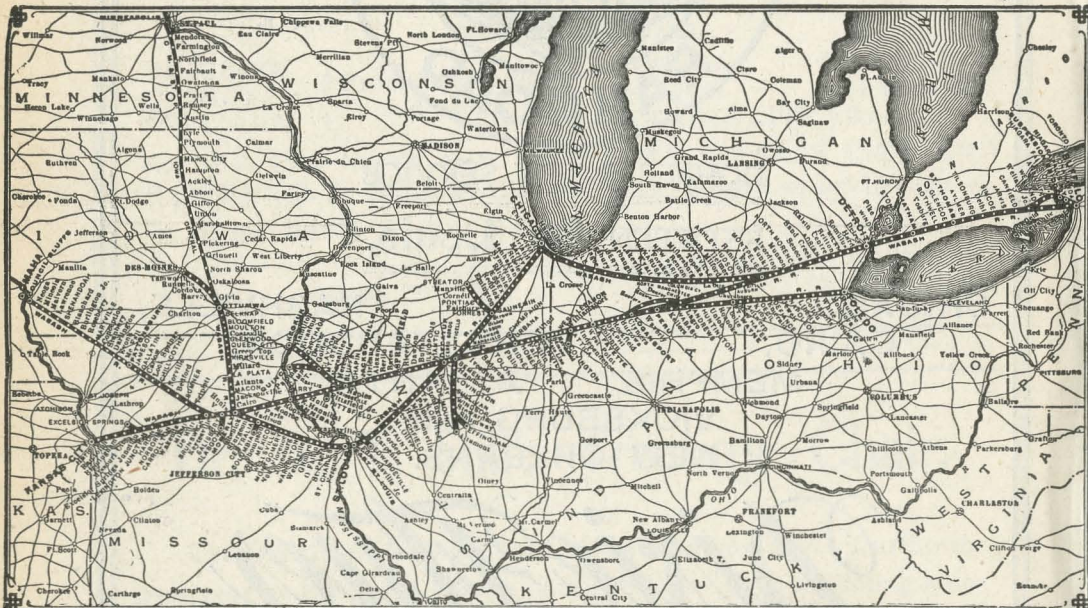


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