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THE OSTEOPATHIC PHYSICIAN

Volume XIII.

CHICAGO, APRIL, 1908.

Number 4

An Attempt to Outline an Osteopathic Pathology†

Being Chapter V of "Anatomical and Physiological Pictures of Disease."

Diathesis.

THE evidence for the existence of a uniform etiological principle as contained in the osteopathic diagnosis has been reviewed, and has been examined for evidence as to the character of that uniform principle. (Ch. I and II.) The natural and uniform reaction of the body to irritation and injury, constituting the most evident features of that uniform etiological principle, have been briefly reviewed. (Ch. III and IV.) The evidence contained in the second source of data remains to be examined for evidence both as to the existence and the character of this uniform reaction. During the course of this examination the anatomical and physiological pictures of the diseases will also become evident, and will therefore be drawn. These pictures will be found to contain no other pigments than those enumerated. In chronic affections, features will be found that are true natural responses to irritation and injury, but require more extended biological study. For the sake of leaving a single, clear picture in the mind of the student, the consideration of these features is postponed until the completion of the consideration of the more evident simplicities.

But before proceeding with the examination of this evidence and the consideration of these pictures, the task will be made easier and the comprehension clearer if we will first examine another law of this process, and make a review of the body with this law in mind, thereby emphasizing still further the unity of the process, the simplicity and uniformity of nature's action in disease. This law is the law of diathesis.

Very nearly every case that comes to the office of an osteopathic physician has more than one thing the matter. The osteopathic physician takes charge of the patient as a whole, not only of the particular symptom that the patient complains of, so he makes it his business to inquire into all the affections from which the patient suffers.

At once there comes to light a very interesting thing. Among all the affections from which a patient suffers there will be a general resemblance. For instance, if he has an affection in his throat, one in his abdomen, and one in his leg, it will be found that they are all alike—if one is a sensory disturbance, all will be sensory in nature. If the affection of the throat is motor, the affection in the abdomen and leg will also in all probability be motor affections, and so on. The word diathesis is already in use to indicate such conditions as this, as, for instance, we speak of a tuberculous diathesis; so it may be expanded to cover the whole field of tendencies in the body, as here described. The two above would then be a sensory diathesis and a motor diathesis. The number of diathesis is practically the same as the number of stages of the natural response to irritation and injury, although it is found that each stage presents a number of varieties or subdivisions.

A knowledge of this principle is often of

greatest assistance in diagnosis, and as often in treatment. In 1903 I examined a case diagnosed as appendicitis, in which I differed with the other diagnosticians. The patient presented a marked sensory diathesis. There was a sensory affection of the larynx, which yielded immediately to treatment. There was a sensory reflex of the pharynx easily excited in various ways. Obstinate constipation was also of the sensory type. Finding in one parent hay fever, I felt the tendency to be pretty strong, and so diagnosed the so called ap-



Dr. E. E. Tucker, Jersey City, N. J., Who Attempts an Outline of Osteopathic Pathology in This Issue.

pendicitis as a largely, or purely, sensory condition. The case passed out of my hands in a very short time, however, and an operation revealed the appendix "in a surprisingly healthy condition—a little twisted."

In another instance, that of a child suffering with enuresis, I found in the father of the child a most exaggerated motor diathesis. This exaggeration was so great that the case had been generally diagnosed by a great number of physicians as locomotor ataxia. There was no ataxia, however, other than that the muscles all responded to voluntary stimulus with a prolonged and intense tonic spasm, and no other spinal lesion was apparent. It was simply a case of the overbalancing of the inhibitory functions by the stimulatory ones. An attack of hiccupping, which had usually last-

ed for days and had often nearly proved fatal, was immediately relieved by setting the seventh rib. The condition as a whole, however, yielded but slowly to treatment.

In the child of this father the origin of the diathesis leading to enuresis was so evident that I fearlessly attributed the enuresis to muscular spasms of the same type as that from which the father suffered, and advised a patient education of the child's nervous system and guarding of the bladder from irritation (as by discouraging drinking before going to bed).

I have mentioned here but two typical cases, not wishing to make the reading heavy by repetition. These two cases are sufficient to show the law of the diatheses, which are most evident in sensory and motor neurotic conditions. The experience of no one man is sufficient to establish a new point such as this. The evidence is in the office of every osteopathic practitioner. Suffice it to say that in my own several years of practice I have found few or no exceptions to the law, and many most striking and most helpful verifications.

The law is of course not absolute, as one part of the body may be suffering the extreme degrees of response to injury and other parts perfectly healthy, others still suffering in lesser degree. But it is sufficiently general to make it of great value in diagnosis and treatment. Some of the peculiar diatheses I have noted are a tendency to punctiform hemorrhages, found in father and two out of four children (capillary hemorrhages diathesis); tendency to the massing of the blood in one part or another of the body (vasomotor exaggeration diathesis) (controlled by first warm, then cold water). Apathetic diatheses are common. Vaso constrictor diatheses are frequently met with, especially in depressive cerebral and nervous conditions.

Conscious nervous diatheses may take many bizarre shapes, entirely aside from the coloring that may be given to all sensation by the contents of the cerebral consciousness. It will often be found that these shapes are traceable to some precedent physical condition, which radiates through the body and influences all sensation. The cure of the precedent condition will in such cases remove the diathesis; these may be called transitory nervous diatheses.

An interesting diathesis that I noted in 1904

CONTENTS.

An Attempt to Outline an Osteopathic Pathology	1
Diathesis	1
Sensory	2
Motor	2
Catarrhal	4
Fibrinous	4
Precipitations	5
Nutritional	5
Dr. C. E. Still Loses Damage Suit in First Trial	6
N. Y. Corporation Counsel Says We Are Not Physicians	7
Great State Meeting in Colorado	7
Dr. George A. Still Makes a Record	7
A Last Stand in Louisiana	8
Chicago Has Wakened Up Finally	8
Dr. Bunting Will Speak at the National Advertising Convention	8
New Jersey's Sixth Fight Unsuccessful	8
Can We Shut Up This Chicago Diploma Mill	9
The Keeley Cure Proven a Faith Cure	9
Cartoon, "Spring Time Idylls"	10
Want More Light on Smallpox	10
Application for Membership in A. O. A.	11
News of the Profession	12
A Plea for Symptomology	14
Tuberculosis "Sometimes" Curable	14
Originality in May Issue of "O. H."	15
Personals	15
Want Ads	16

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THE OSTEOPATHIC PHYSICIAN

was a tendency to acute crises which passed off rapidly. I had not much opportunity to study this diathesis, but it appeared that the system would fight off the condition as long as possible, and then, being finally bowled over, would yield utterly and suffer acutely for a short while and recover as quickly. This was the case with affections in widely different parts of the body.

If now we will take some general text book and make a list of all the sensory disturbances of the body, then draw them all on the same chart of the body, we shall find that we have a complete picture of the sensory mechanisms of the body. The same thing is true of the motor affections. It needs but to apply to them the same reasoning as that applied by Dr. Osler to affections of the intestinal tract associated with diarrhoea, to make them one disease differing only in location. These pictures will correspond with the diathetic pictures.

Inflammatory affections present different phases, but of each phase the same thing is true and to each the same reasoning may be applied. This is the justification for the pictures that follow.

It needs but to add that, as shown from the text, these affections spread from one place into another; that they frequently alternate; that the similar forms in different organs are associated in the way described under the foregoing discussion of diathesis; and, finally, that the milder forms are exacerbated into the severer ones, and that the severer ones usually begin with the milder ones, to make the weight of evidence in clinical practice for the uniform etiology overwhelming.

Sensory.

IN every part of the body in which conscious sensation is found, a disease of this sensory mechanism exists. Of course, every part of the body is diseased at times, and with the others, these sensory mechanisms.

Do these diseases differ from each other at all in etiology? An examination of them shows accurate resemblances, and practically no differences except those based on the peculiarities of the parts and those arising from the different local irritants liable to cause the affections—with the inference that all differences will be explained when more perfect knowledge of these anatomical differences is obtained.

Not only does examination show etiological harmony, but it is known that all nervous mechanisms are alike in vital structure. The laws of nervous action and the laws of vitality and general nutrition are for all alike, and the reactions to injury and abuse are alike; the diseases therefore should all present etiological harmony.

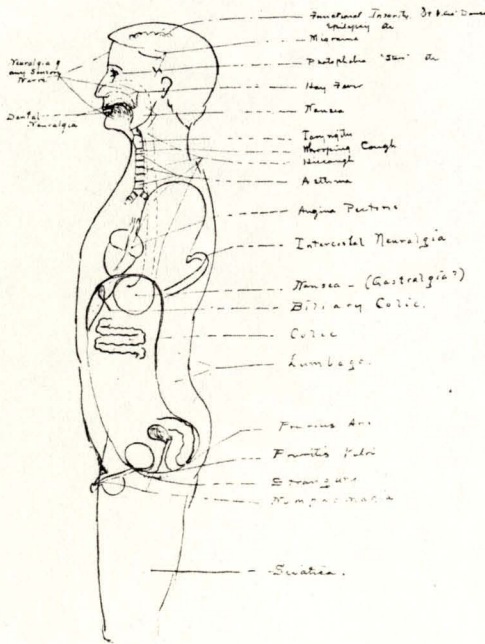
The classification might be made more accurate. There are various forms of this sensory reaction. In some cases is found pain; in others, itching or tickling; in others, burning, coldness; in others, merely continued consciousness, whereas normally there is unconsciousness; in other cases, weakness or absence of sensation. The same kind of reaction present in one is likely to be present in all. But all of these forms may be explained according to normal nerve action. Continued consciousness is, of course, the mildest form of reaction to irritation and indicates a continuous irritant of mild degree. But continuous irritation tends to deaden a nerve; whence deadness of sensation is the second severer form. Itching is the next less mild form. Or itching may be due to waves of severe contraction along the arterioles and capillaries, or to the slow distension of areolar tissue and nerve fibrillæ by escape of oedema, from such spasm. Heat or cold may be due to affections of the thermic nerves, or to hyperemia, or anæmia from constriction of arterioles—marking, as a rule, the verging into inflammation. Hyperæsthesia is the border land of neuralgia. Pain is, of course, the severest form of sensory reaction.

Neuralgia is properly confined to the sensory, one of whose chief functions is pain.

Sensory reactions are felt so long as the higher centers retain control of the ganglia. If the shock from the irritation becomes greater, the local ganglia act, often breaking away from the control of the higher ganglia, marking the transition of the sensory into the spasmodic affections.

In some instances, the sensory features follow the spasmodic, as, for instance, when the continuous contraction of muscles causes pain

No. 1. Sensory Reflexes, (Schematic)



or nausea, etc. But in these cases the sensory reaction is secondary to further irritation caused by the contraction.

Pain is defined by Byron Robinson as the prayer of the nerve for pure blood. Although we cannot assent to this as an invariable rule, since there are obviously instances where it cannot be the case, yet pain may arise from that cause, lack of pure blood diminishing the resistance of the nerves so that the slightest irritant overthrows them, or even to such an extent as to cause starvation and hence pain in the nerves.

The causes of this diathesis (apart from causes of local manifestations) may be summarized tentatively. Heredity plays a leading role (all authorities). Mental conditions are a great factor; pain being a part function of the higher ganglia, is influenced by them; they exert either an inhibitory influence or a magnifying influence. Similarly a robust constitution, by forbidding the expenditure of nervous energy in the graver stages, may concentrate it upon this stage. Any conditions of life which may try the nerves, or which cultivate largely the sensory mechanism will, of course, make themselves felt in the sensory diathesis. Any neuralgic or sensory disturbance anywhere in the body seems to incline the whole nervous mechanism in the same direction—which may be the true origin of all diatheses.

The treatment of a diathesis as such often becomes important. If the chain of causes leading up to a certain malady can be broken at any link, the chain is broken; and often the diathesis is the most easily reached link. Often also it is the most important thing, as in general nervous prostration.

The principles of treatment of this diathesis are as follows:

The removal of all internal lesions is the first step to be considered in every case. Removal of all conditions in the environment or

the occupation that make for sensory weakness, or removal to a new environment, until equilibrium is established, may be necessary. The treating of a diathesis is in general a matter of education of the nervous system. It requires patient work. "To make a calf fat, you have to keep feeding it," said Dr. Still, which may be quoted in this connection. Laughter, cold water shocks, open air exercises, exercises that require steadying of the nerves, and "relaxing exercises" have been found beneficial.

Osteopathic treatment at the site of the local difficulty will affect the diathesis as a whole. All osteopathic palliative treatment is through the sensory nerve, and the results obtained show what can be done in this way.

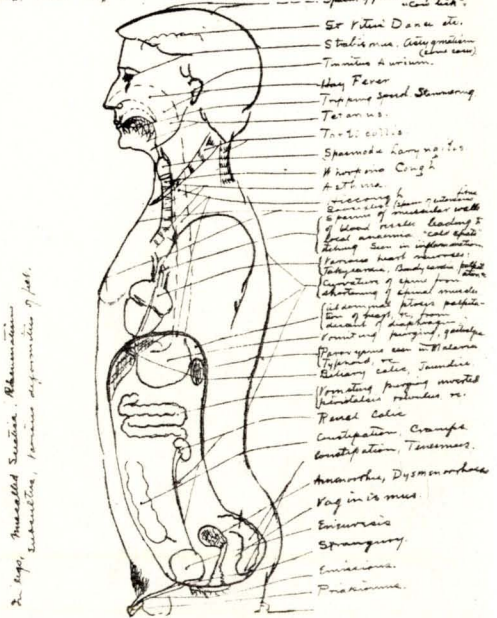
The use of the suffix "algia" indicates a classification along this same line, but the conception was never carried much further than the naming of diseases, and bore little or no fruit in the treatment of them, or even in a comprehension of the pathology of them.

Motor affections represent the next stage of reaction beyond the sensory. The natural destiny of a sensory irritation is to be transferred in the ganglia to the motor nerve. Most sensory affections are associated with motor spasms, more or less noticeable, as in hay fever, etc.; prodromes are noticeable in nearly all recurrent diseases, particularly those of a motor type, as epilepsy; and the onset of most acute diseases is with initial sensory reaction (see analyses). This relation is to be understood with reference to the normal morbid process.

Motor.

MOTOR spasms are thus usually to be attributed to sensory irritation. The motor reflexes are as a rule conducted by the lower or automatic ganglia, escaping the inhibitory control by the higher ones. The action of higher ganglia is merely to impose more extensive co-ordination on the reflexes and so to diminish the tendency to motor spasm. In this sense they act in what amounts to an inhibitory way

No. 2. Motor Reflexes



over the lower ganglia. There is no such thing as true or actual inhibition in nerve action; there is only one character to nerve action. But the imposing of more conditions amounts to a practical inhibition, which (unless the irritation exceed the conditions imposed) is effective as inhibition.

Similarly, weak or excitable cerebral conditions may exaggerate the tendency to motor reflexes. It is these exaggerated tendencies that may be called diatheses.

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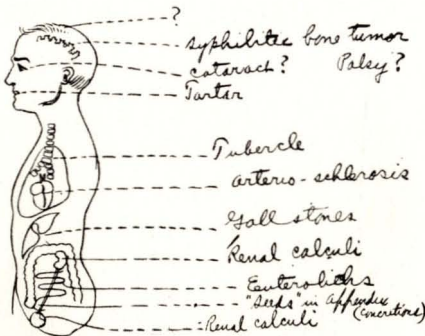
The existence of a reflex motor spasm in any part of the body seems to dispose the whole system to muscular spasm. The origin of a diathesis may be clearly seen here. All new co-ordinations in the nerve ganglia are referred to those at the time existing (whereby intelligent action becomes possible). New nerve stimuli being referred to existing co-ordinations in which are reflex spasms, are thereby inclined in the same way. The same thing is true of all incoming stimuli and of all morbid conditions.

Motor affections appear in all organs in which there is musculature or motion of any kind. In all muscular mechanisms they may be easily recognized; even in the pilo-motor fibres of the hair, producing what is familiarly known as "cowlick"; in the muscles of the skin, appearing as "goose flesh"; in the muscles of the crystalline lens, producing some forms of astigmatism. Motor affections appear also in glands. An exaggeration of this motor activity causes a pressing out of great volumes of normal secretion, highly diluted. Even in the areolar tissue contractile conditions are noted. Motor affections appear in sensory nerves, for, as said, the nerve fibres move to come into connection with each other; neuralgia, for instance, may probably be defined in terms of motor action. Indeed, so may all stages of inflammation be defined in terms of motion—the spasms of the arterioles and contraction of the venules producing the accelerated action, stasis, secretion, etc., which in all other respects obey a chemical law.

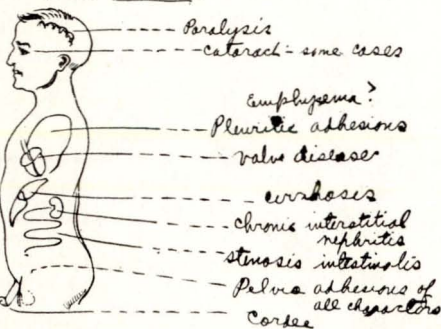
Let us here follow out this idea to a most fruitful development. A normal stimulus passes to the highest and widest co-ordination. A more vigorous stimulus acts through the lower ganglia, escaping the control of the higher. A more violent stimulus still escapes the control of even the lower ganglia, and acts through the local sympathetic nerves in the way described (contraction of venules, spasm of arterioles, and so congestion, œdema, serous

secretion). In true and natural order with these action, an irritant may be sufficiently violent to overbear the co-ordination of even the

PRECIPITATIONS, CONCRETION



SCAR TISSUE (MORE NOTICEABLE CASES)



Depositions in many cases are not the result of precipitation, but of nutritional error, producing excess of the salt over the capacity of the solvent.

sympathetic nerves, and to have its effect on the cells themselves.

This agrees with the results of physiological experiment which show that the minimum ef-

fective stimulus brings about the maximum physiological result.

Nature always keeps her nerve mechanisms adjusted for the widest co-ordination—the co-ordinations of the body as a whole. These wider co-ordinations require more time for their action. Consequently, an excessive stimulus tends to "short circuit" and throw the reaction to lower and lower planes of action, until finally, after the reaction of the cells themselves, the reaction occurs on the plane of iorganic chemistry; and irreversible changes and death result.

Is the etiological picture in these affections of the motor organs different in any respect? The conditions under which muscular action occurs in the body are the same everywhere, and the laws under which morbid muscular action is induced are uniform. The pathological picture of these affections is the same, as will be seen in the analysis. And here, as also in sensory diseases, clinical observation has often traced analogies and has repeatedly noted alternations. The only differences are seen to be in the character of the action, different because the physiology is different, in the severity of the action and in the kinds of irritants that are liable to reach and affect the different organs. Thus there is every reason here also in natural law, in scientific analysis and in clinical observation, to accept the principle of a uniform nosology and etiology.

The various forms of muscular spasm may be more carefully classified according to their relation to the tissue repair process. The first action will be simple tonic contraction, as for the resisting pressure, twisting, etc., as when one leans the abdomen against a chair. The next action will be the normal repulsive or expulsive action. This will be followed by clonic contractions, or by reversed peristalsis, according to location, from a deeper or longer continued irritation.

Contraction of the areolar tissue also occurs,

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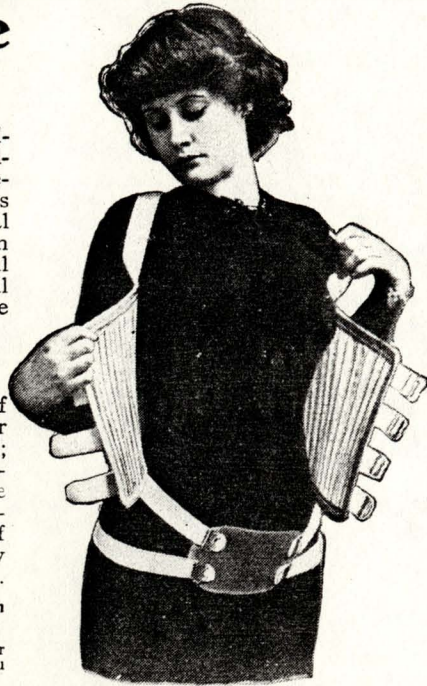
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usually in connection with, but possibly apart from, contraction of the arterioles and capillaries, under the influence of the sympathetic nerves. Etiologically it is a part of the reaction that involves the arterioles, the congestive and catarrhal reaction; its purpose is to confine the œdema.

In the glands, the spasmodic action preceding the onset of inflammation and the failure of function, takes the shape of active pressing out of the fluids of secretion with diminished formation of the true secretion.

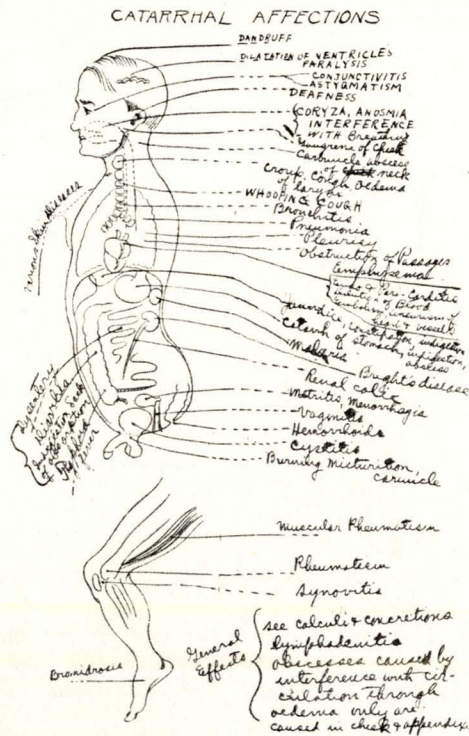
The use of the generic suffix "ismus" to denote spasmodic action indicates the germination of the idea of families in disease, but the idea has not been carried to anything near its conclusion, as is here attempted.

Muscular spasm is the normal response to irritation, the natural destiny of sensory disturbance, the healthiest of all diatheses. The healthier and more vigorous the system, the more vigorous the stand nature will make here in order to drive out or otherwise remove the irritant. This may be exaggerated, however—and only the exaggeration of a natural tendency should constitute a diathesis and require treatment as such.

The principles for treatment of this as for all diatheses are the same—removal of all lesions, abuses and irritations that can be discovered; gradual education of the nervous system, and treatment at the site of the local spasms

Catarrhal Affections.

WHEN reflex action is so vigorous as to escape the co-ordinations in the lower spinal ganglia, it vents itself on the local sympathetic nerves, causing congestion and catarrh. These nerves may become through some abuse or other condition the most sensitive of all the nerves, and so respond first to irritants, and create a catarrhal diathesis. It



is still definable in terms of motion. The venules contract, retaining the blood; the arterioles respond with spasmodic pumping of the blood into the capillaries; and the weak-walled capillaries, between the vigorous pumping of the arterioles and the detaining contraction of the venules, simply dilate. The result is congestion, or catarrh, possibly with

hemorrhage. The stages of this action have been clearly pictured in pathologies.

As might be expected from analogy with the picture of successive stages of nerve action, just sketched, the access of irritation to the cells themselves stops their normal physiological action. Physiology is based on the minimum stimulus; and while in the congestive stage the reaction has not occurred on the cell plane, the cell is nevertheless brought nearer to the verge of it, and farther away from physiological equilibrium. Wherefore another stage of reaction might be pictured, intervening between the motor and the congestive or catarrhal—the stage of failure of function. This stage is, however, but an interval and not a stage.

The oversetting of the equilibrium of the vaso-motor system and inhibition of the control of the cerebro-spinal ganglia seems to spread a condition of irritability through the whole sympathetic system—as indeed it must, for this system, having control of the distribution of the blood, must act as a unit. This condition and other conditions similarly affecting this system create a tendency or diathesis.

The treating of this diathesis as such often becomes important. The correcting of any mechanical irritation or functional abuse is the first consideration. The most direct means at our command for reaching the vaso-motor nerves and exercising them until their tonicity is restored is by means of hydrotherapy and thermic treatments. The great number and variety of these emphasize their importance. Massage reaches the sympathetic system through the cerebro-spinal, stimulating its control.

A tendency to catarrh may mask merely a lack of development of the muscles and the cerebro-spinal nerves, preventing the excess of stimulus from taking effect in muscular action, and leaving weakened cerebro-spinal control of vaso-motion. This may be corrected by systematic exercise.

Local treatment at the site of the catarrhal or congestive trouble should be adapted to the needs of the part.

The etiological harmony of the catarrhal affections has been repeatedly pointed out by different writers, and is accepted in a more or less general way by pathologists, but this seems to have been without much effect, for catarrh of the nose and of, say the bladder, are still regarded as diseases of different etiology. But the relation of catarrh to natural processes and natural law has not been effectively presented, nor has its intermediate relation on the one hand to sensory and spasmodic, and on the other to phlegmonous, membranous and ulcerative affections, been adequately emphasized. Nor have many of the natural sequelæ of the process been attributed to their real cause—as, for instance, the causing of precipitation in various secretions by dilution with catarrhal exudate.

In this cut we present the results, so far as ascertained, as well as the disease itself, in which catarrh is found.

Fibrinous Affections.

PHLEGMONOUS and membranous affections are not described in connection with all organs. They are found on practically all surfaces, however, and are doubtless more rarely to be found in all tissues as well. But fibrin forms with difficulty in the tissues themselves—the reason for which has been pointed out. Wherefore the list of phlegmonous and membranous affections is less complete than the catarrhal, etc. This also for the reason that it is a severer form of disease, and therefore occurs more rarely.

Membranous and even phlegmonous conditions are not always distinguished from ulcerative conditions; partly on account of superficial resemblance; partly because membrane is found in ulcers; partly because membranous

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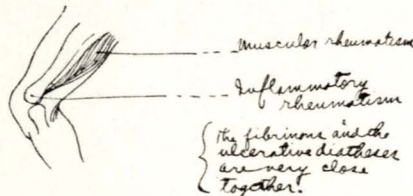
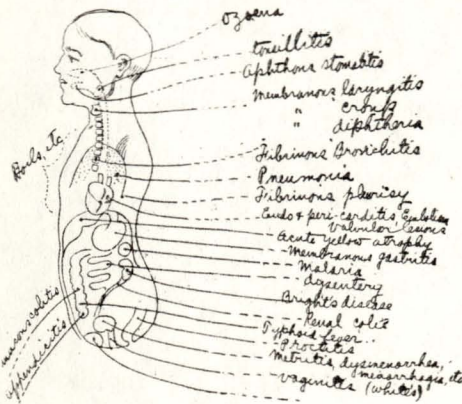
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formation usually ends in ulceration, on account of severity and retained secretions.

Ulceration results from the presence of any foreign substance in the tissues, and inflammatory secretions are to be classed as foreign substances which lead to ulceration. But in any case all the stages of inflammation pre-

FIBRINOUS AFFECTIONS



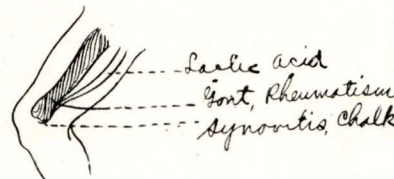
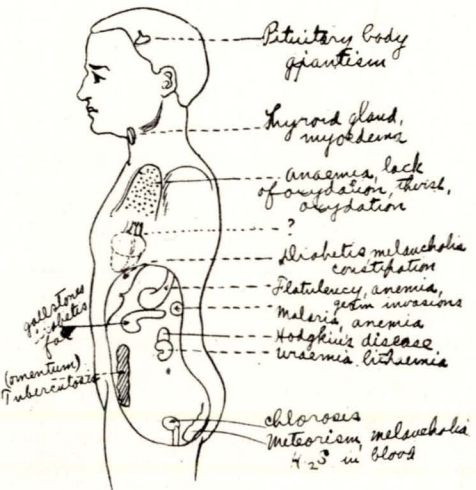
cede the ulceration. The etiological harmony of all such conditions should be accepted.

An ulcerative or a phlegmonous diathesis indicates some grave general disorder, as syphilis, tuberculosis, etc., and should call for most thorough and careful treatment.

Nutritional Affections.

NUTRITIONAL diseases represent an earlier stage of reaction than inflammation, but these diseases are manifested only as results of chronic continuance of the

NUTRITIONAL



condition, and hence are to be classed as the first chronic result of the reaction to irrita-

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tion. They represent the failure of function which precedes and accompanies inflammation. Although their manifestations may become acute, they are chronic, as a rule, in their incipency.

Widely different in their manifestations they yet present etiological harmony in their causation—the failure of function—and should be classed accordingly.

Many germ diseases are attributed to nutritional error, but it is not possible as yet to classify them on that basis. Many diseases, such as obesity, tuberculosis, gout, diabetes, are sometimes due to localized cause, as shown; but more frequently are due to general intoxication of the nervous system.

Dr. C. E. Still Loses Damage Suit in First Trial.

MISS GRACE ATKINSON, a graduate of the A. S. O., secured a judgment of \$10,000 against Dr. Chas. E. Still in the circuit court at Unionville, Mo., March 21 on the allegation that he had when treating her a couple or more of years ago broken her breast bone and fractured several ribs. An appeal was promptly taken. One queer thing about the verdict, which was reached at an all night session, is that on the first poll the jury stood 8 to 4 for the defendant. The A. S. O. people say the verdict is preposterous and ridiculous and will easily be reversed in a higher court. We believe it.

Since this suit was concluded Mrs. Beebe Ruth Jepson, of Minnesota, a senior, has brought suit against the school alleging that she was improperly treated by doctors in the hospital in February, 1907.

We may now look for a dozen or twenty more people who want some easy money to file suit against the A. S. O. or Dr. C. E. Still for sums ranging up to \$25,000. When some one starts a little fun like this and seems to "make money" so easily in a lower court there are scores who are ready to jump in and begin suing on general principles, too. However, one and all will find it a vastly different thing getting damages in a lower court and getting cash in an upper one.

If this sort of business should go on, with the impetus this unfortunate Atkinson verdict will give it for the time being, it would put the A. S. O. out of business. I regard such attacks upon the parent college, or any of our colleges, as attacks upon osteopathy and the profession.

I am informed that Miss Atkinson never told any one of her alleged injuries at the time, never went to bed with them, kept up her work in classes and only came to a conclusion about them a long time after they were supposed to have occurred. Any one who has ever seen Dr. Charley treat will be compelled to smile at such allegations. Charley never was a very hard worker muscularly.

If every one who actually had or fancied grievances against doctors, hospitals and medical colleges filed suits for damages there wouldn't be courts enough to try the cases.

It seems very important to me that all osteopaths should protect their own institutions instead of trying to tear them down. Those who do tear down are enemies of the science and profession. There are enough enemies among the M. D.'s trying to destroy osteopathy without any of our own people striking at our college foundations.

I predict here that the Atkinson verdict will be reversed.

Manual Treatment.

Mrs. C.—"Do you believe that cures can be effected by the laying on of hands?"

Mrs. D.—"Most certainly. I cured my boy of smoking cigarets that way."—*Chicago Medical Recorder.*

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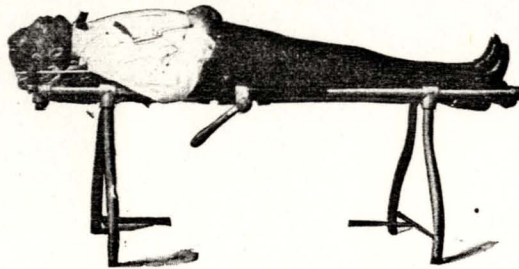
Physicians' machine, 28 inches high, engages body at head, feet, shoulder and hips.

DR. E. J. FAVELL, Superior, Wis., July 7, 1906.

"I have made good use of the couch and it works fine. It is just what we need and is sure to be of great benefit in a vast number of cases."

DR. C. E. EDGERTON, D.O., Des Moines, Ia., July 28, '06.

"The couch is surely all that you claim for it, I believe I will be able to do great good with it here."



Removes pressure while you make hand adjustment. Restores cartilage. Your Armamentarium is incomplete without it.

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CEDAR RAPIDS, IOWA, U. S. A.

New York's Acting Corporation Counsel Says We Are Not "Physicians."

ACTING Corporation Counsel George L. Sterling delivered yesterday an opinion to the Board of Health in which he argued that osteopaths should not be registered as physicians by the board. He recommended that osteopaths be not considered physicians within the meaning of statutes and ordinances relating to physicians in the case of the death of a person, and that the whole question be thoroughly investigated and passed upon by a court, according to the New York Tribune, April 2.

The opinion was delivered upon the request of the Board of Health made December 20, and is based on the definition of physicians given in the present law.

"The practice of osteopathy is mentioned as distinct from the practice of medicine," the opinion reads. "The result is that the holder of a license to practice osteopathy is not allowed to practice medicine except so far as osteopathy enters into the field of medicine. The holders of such a license derive from the

act no new right, except the privilege of practicing osteopathy, provided neither drugs nor surgical instruments are used."

Dr. Charles F. Bandel, the Brooklyn osteopath regarding whose case the opinion was written, said last night that the New York Osteopathic Society, of which he is an ex-president and a director, would begin mandamus proceedings today to bring the case before the courts. If necessary, it will be carried up to the Court of Appeals. The society has retained Martin W. Littleton to represent it.

The certificate which Dr. Bandel attempted to file, acting on the supposition that he was empowered by the new laws to file a death certificate, referred to the death of John Visscher of 423 Clermont avenue, Brooklyn, on February 1. The cause was given as Bright's disease. The certificate was refused, though the coroner found that the correct cause of death had been stated.

Great Meeting Held by Coloradans.

THE Colorado Osteopathic Association opened its Tenth Annual Meeting Thursday forenoon, March 19th, at the Albany Hotel, Denver. About fifty were in attendance. The sessions Thursday were taken

up with reports of officers and committees. An interesting paper was read by Dr. F. I. Furry, of Cheyenne, Wyoming, on "Some Results of Osteopathic Treatment in Ametropia." Clinics were held by Dr. Young, after which Dr. Young presented the subject, "Osteopathic Methods in Certain Surgical Affections," which was intensely interesting to all present.

Thursday evening a banquet was held—fifty-one present to enjoy the feast for mind and body.

Friday morning session opened with discussions on "The A. T. Still Post-Graduate College of Osteopathy," opened by Dr. L. B. Overfelt, of Boulder. Communications were read. One from Dr. F. E. Moore, President of the A. O. A., was especially appreciated.

Some interesting cases were presented in Clinics by Dr. Young, which were followed by a paper by Dr. D. L. Clark, of Fort Collins, on "Field Education."

The afternoon was taken up by "A Study of the Various Spinal Segments," by Dr. Young, and the election of officers, which was as follows:

President—Dr. L. B. Overfelt, Boulder.
First Vice President—Dr. Nettie H. Bolles, Denver.

Second Vice President—Dr. J. D. Glover, Colorado Springs.

Secretary—Dr. G. W. Perrin, Denver.
Treasurer—Dr. B. D. Mason, Denver.

The Association voted to hold an evening session for unfinished business, and to discuss legislative matters. At this session the Secretary was instructed to draw up resolutions recommending Dr. Young's lecture on Spinal Segments to all State Osteopathic Associations. Motion carried that the officers of the Colorado Osteopathic Association be instructed to direct work in legislative matters toward securing a separate board.

Whereas, The Colorado Osteopathic Association has experienced listening to a lecture by Dr. F. P. Young upon the subject of "A Study of the Various Spinal Segments," aided by charts arranged by the Doctor.

Resolved, That we heartily recommend this lecture to all State Osteopathic Associations, believing that it fills the want of our profession by showing how certain parts are affected by certain lesions in a purely osteopathic manner, giving valuable points not found in any text book or chart published.

(Signed) FANNIE LAYBOURN,
Secretary.

Dr. Geo. A. Still Makes a Surgical Record

The Kirksville Daily Express of March 26 contains an interesting writeup of two patients whom Dr. George Still operated on at the hospital this year. Prominent eastern surgeons have had quite a discussion as to whether or not a silver plate had ever been successfully inserted in a trephined skull. While some had taken the stand that it had been done, no authentic case, it seems, was on record or was available. This discussion had occupied a part of several issues of the Medical World of Philadelphia, and the editor, in the March number, had finally concluded that such an operation had never been performed. Through a clipping bureau he received the account of the operation upon H. T. Roots by Dr. George A. Still at the A. S. O. Hospital, Kirksville, and wrote to George for particulars. He furnished them in detail. It was published. Mighty fine for an osteopath in a little town to be able to settle a question of such importance for the surgical profession, eh?

Fraternally,
H. THOMAS ASHLOCK, D. O.

Struck When Down.

Invalid—Doctor, I must positively insist upon knowing the worst.

Dr. Wise—Well, I guess my bill will be about \$85.—Chicago Journal.

THE OSTEOPATHIC PHYSICIAN

The Organ of News and Opinion for the
Profession.

Published on the 15th of every month by The OSTEOPATHIC
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Vol. XIII. CHICAGO, APRIL, 1908. No. 4.

Fairness! Freedom! Fearlessness!

EDITORIAL

"Hew to the line, let chips
fall where they will"

**A Last Stand
in Louisiana**

LOUISIANA osteopaths are in a struggle for existence. It will be their fourth and, unless assistance comes from outside the state, it threatens to be their last battle. That is to say that the chances at this time look heavy against them.

The M. D.'s of the state have not only organized fully, but as politicians have elected a legislature on the issue of driving osteopathy out of the state in practically every district of the state. The M. D.'s pledged or attempted to pledge the candidates for the House and Senate before the last election, to the effect that they would vote against anything osteopathic that came up. Many of these candidates were elected, and a good, round number of them are M. D.'s.

Our little band in the state have thrice met the enemy and saved the day, but they scarcely feel competent to do it again out of their own resources. They are willing to do and die, if need be, without any "holler," but for the good of osteopathy and the sake of the profession at large, they are very much averse to taking the chance of being defeated in this contest.

Consequently, they authorize *The O. P.* to make an appeal to the rest of the profession to send them aid. Those brother and sister osteopaths in other states where things are on a settled basis can each well afford to give a little contribution to this cause. Subscriptions should be sent to Dr. C. G. Hewes, secretary and treasurer, 406 Godchaux building, New Orleans.

Dr. Henry Tete writes that the last battle cost the local osteopaths about \$900, not counting the time lost from practice, etc. They are willing to make the same sacrifice this time, only they feel that it will scarcely avail against the forces arrayed against them.

The American Medical Association has picked out Louisiana as another state like Alabama, where they are going to try and settle the osteopathic issue for all time. That is in harmony with reports outlined in these pages before. It is the plan of the American Medical Association to whip osteopathy, one round at a time, in the future, and make sure that each successive battle pulled off is decisive for that state and community. Just now Louisiana is the battle ground. The State Medical Society is backed up by a closely organized chain of county societies, and the local representa-

tives of the American Medical Association are on the ground and working hard.

This following appeal from Dr. C. G. Hewes, secretary of the state, will be self explanatory:

"We are on the eve of what will undoubtedly prove to be the hardest battle osteopathy will have ever had in this state or any other. Three successive times have we completely defeated the medical profession in their effort to pass laws antagonistic to our science. At the last session of the legislature we got an osteopathic bill through the House and Senate committee, but through the influence of the M. D.'s it was defeated in the Senate. The fact that we came so near passing our bill has aroused the medical profession to such an extent that they used their every influence in electing only men to the House and Senate who were favorable to their bill which will be introduced next month when that body meets. In a great many instances they succeeded. Whether they have a majority of the members favorable to them I can't say, but I do know that it will be impossible for us to pass our bill, and we will have to use every influence we can possibly bring to bear to prevent being legislated out of the state. We propose to get good men down here to assist us in the fight, which will necessarily entail quite an expense. In the past we have borne that expense ourselves, but this year, owing to the fact that the opposition is greater, considering the fact that the American Medical Association is making Louisiana the center of attack, it will be more than we can bear, and I therefore in behalf of the osteopaths of Louisiana earnestly solicit your assistance in starting a relief fund by appealing to the osteopaths through their official journal, the *Osteopathic Physician*. I assure you all funds will be expended with the wisest economy and for pure osteopathy. Address all communications to

"Fraternally yours,

"C. G. HEWES, D. O.,
"Secretary and Treasurer."

**Chicago Has
Wakened Up Finally**

AFTER so long a time the Chicago Osteopathic Association has really roused itself and is going to make history for the profession. Its monthly meetings have been gradually getting better and larger all the time, and it has already come to the point where the osteopath who stays home from the regular monthly meeting at 57 Washington street, is absenting himself from a love feast and a clearing house of experience in practice which would be worth money to him, were he there. In addition, all lines of professional activity are showing increased zest and progressive-ness.

Last month the Littlejohn Osteopathic Hospital pulled off a lecture at Orchestra Hall, which was a great credit to the profession. Walter Wellman, the Arctic explorer, gave an illustrated stereopticon lecture, showing his dash for the Pole in an airship. It was great. And the good things have only begun.

On May 7th, Dr. C. W. Young, of Minneapolis, will be the guest of the Association at the Sherman House parlors, where he will make an address on health matters.

Then on May 16th, Dr. William Smith, of Kirksville, will be the guest of the Association at Orchestra Hall, and will give another illustrated lecture on "The Rise and Prevalence of Osteopathy," tracing it from its crude beginning, with which he was so thoroughly familiar, until its success of to-day. This lecture is free and the enterprising practitioners in the city, comprising the Chicago Osteopathic Association, have arranged to meet the expense of this lecture conjointly, as a compliment to their patients and friends, all of whom are cordially invited to be present and bring their friends. The auditorium will seat a good many people, and every osteopath who is loyal

to the cause is invited to see that fifty of his friends and relatives and patients are there.

Dr. Smith will give Chicago a rare treat on that occasion, and his lecture will be in the nature of "a little journey to the home of one of the worlds great scientists and humanitarians." Some day, we think, Elbert Hubbard should go there, too. Those who have heard Dr. Smith's lecture all over the United States say it is the greatest ever, and it would be a pity if our Chicago practitioners failed to bring a representative crowd of educated, influential people together on that occasion to hear what Dr. Smith will have to say for our system of practice. Osteopaths are invited to bring their M. D. friends in on this occasion also.

Let us all pull together to make it a grand success.

**Dr. Bunting Will Speak
at the National Ad-
vertising Convention.**

DR. HENRY S. BUNTING was selected by the National Association of Advertising Novelty Manufacturers in annual convention at Chicago recently to represent them in the program of the Associated Advertising Clubs of America Convention to be held at Kansas City August 26-27, 1908. He will thus be spokesman for one national body of advertising experts in the councils of another, and will make an address on the subject of "Specialty Methods of Publicity."

Perhaps it is not generally known that the editor of "O. H." and "The O. P." has wide reputation as an expert in publicity and promotion methods, particularly in specialty advertising methods. He was the founder and is proprietor of *The Novelty News*, the only journal devoted to specialty methods of publicity, and beyond question, the largest and most aggressive advertising journal published anywhere in the world today. It has a world-wide circulation. A year ago he was a guest of honor of the New York Advertising Show, at Madison Square Garden, addressing the advertising interests assembled on the subject "Individual Appeal in Advertising."

The users of *Osteopathic Health*, therefore, should be alert to the opportunity presented them for practice building when The O. P. Company makes the statement "we sell a skilled promotion service in our magazine—not merely printed paper."

**New Jersey's Sixth
Fight Not Vain,
Yet Unsuccessful.**

FOR the sixth time the N. J. O. S. has simply to report "progress" in the matter of legislation. Every year sees us in a stronger position than the year before, and we believe this year is no exception to the rule. On March 4th we had introduced into the Assembly a bill which was practically the A. O. A. model bill, calling for an independent examining board of three, to be appointed by the Governor.

This board would have the power to license the osteopaths now practicing in the state who had the twenty months' course, and those who should enter the state in the future, who had taken the twenty-seven months' course, with or without examination at the option of the board.

The bill carried a penalty for anyone practicing osteopathy without a license.

Unfortunately the Committee on Public Health to which the bill was referred (against our strongest opposition) was made up of one M. D., one member from a district in which there was only one active D. O. (too many M. D.'s), one member who was against us last year, and two others who were willing to

report the bill favorably. So the committee stood 3 to 2 against us.

We had two hearings on the bill. At the first hearing the opposition was represented by four prominent conservative M. D.'s whose only objection advanced against the bill was on the point of a separate board. Our speakers for the bill were our attorney and Drs. C. E. Achorn, of Massachusetts; F. B. Young, of Des Moines; Geo. W. Riley, of New York, and our president, D. Webb Cranberry, all of whom made able and concise speeches. We believe that one member of the committee, and the M. D.'s in general, stayed away from the hearing in order that they might be able to demand another one and so play for delay. The unfavorable position of the committee forced us to accede to another hearing.

At the second hearing the M. D.'s were out in force and conducted the usual more-or-less mud-slinging opposition. Dr. Achorn assisted us again and the arguments advanced for our side were gentlemanly, strong, clean-cut and to the point; one of the very best representations that I have heard at a hearing.

But anyone with legislative experience knows how much weight a hearing carries. The point is here: the M. D.'s had politically the stronger influence where it was most needed. In this case it was with the committee. If the bill had been reported out, we had a good fighting chance on the floor, with considerable influence in high places.

The outcome of the whole matter was that the M. D.'s proposed a substitute to the committee, the same bill that passed the Senate last year. This bill purported to be fair, but

was full of "jokers." It gave us one man on the present board, which board would have the say as to what osteopathic colleges were up to the standard (you can see the beautiful possibilities of this provision) required a four years course, made us take all examinations in branches common to all schools with the medical applicants, and then, to cap the climax, provided a prohibition against our giving drugs, practicing major or minor surgery, treating infectious or contagious diseases, or signing birth or death certificates.

We had our bill withdrawn Monday, March 30th, to prevent the majority of the committee reporting this as a substitute measure.


Had the substitute been reported there is no doubt that it would have passed the Assembly "with bells on" that same evening, as a committee substitute generally goes through, and many of our friends would have thought that they were voting for us in voting for it. We believe that our withdrawing the bill was a surprise party to our friends the enemy, as they thought they had matters their own way. At this time the session was too near an end for the substitute measure to be introduced as a new bill and take the usual course.

The N. J. Society will have a meeting on the 25th inst., and start on our work to secure favorable legislation next year. We are bound to get what we want, it is only a question of time. Our forces are united and from past experience we are driven to adopt the motto "No compromise."

Fraternally,
MILBOURNE MUNROE,
Secretary.

East Orange, N. J., April 8.

Glyco Thymoline



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210 Fulton St., New York

Can We Shut Up This Mail Order Diploma Mill in Chicago?

THERE is a correspondence school diploma mill operating in Chicago which alleges "to graduate its victims into lucrative osteopathic practices," known as the Columbia College of Osteopathy. This institution has been running for a good many years and advertises in various papers of occult, new thought and mail order fame. Repeatedly have osteopaths called our attention to it and asked what could be done to expose its methods and to suppress it.

One of the most recent suggestions to this effect came from Dr. Walter J. Novinger, of New Jersey. We have considered various methods of investigating this institution with a view to bringing it within the pale of one or another law, but admit the difficulties presented at every turn. There is no law in Illinois, and the law that exists encourages everything in the nature of fake that can possibly harass the good name of osteopathy. It puts a premium on whatever will traduce osteopathy.

If it could be proven, however, that the Columbia College of Osteopathy is doing a fraud-

ulent business, it would be a simple matter to snuff it out of existence through the kindly intervention of the United States Postoffice authorities. The question is to have proofs of wrong-doing. The government officials do not act upon hearsay evidence.

Now, here is a plan that suggests itself to us. If it can be shown that this college advertises to equip men and women to practice osteopathy, carrying the promise that they can step right out from the school into lucrative practices all over the Union, whereas, as a matter of fact, as soon as these dupes buy their little diplomas, following a flimsy course of study, they run up against state laws and court decisions in three-fourths of the states of the Union, which make them outlaws and not only prevent them practicing but in many instances fine them and send them to jail, then it would be a clear case of using the mails for obtaining money under false pretenses. The government steps with iron heel upon fraud in its every aspect.

We have no doubt that the government,

upon such evidence being presented to it, would put the perpetrators of this alleged Columbia College of Osteopathy out of business, and perhaps where they would take a good, long vacation in retirement, at hard labor—just as they have done many another eminent member of society the past decade.

The question is, can the osteopathic profession cooperate and produce the evidence? Do any of our 5,000 osteopaths know a single young man or young woman who has obtained a diploma from this school, after paying a certain sum of money for one of their alleged courses, who was chagrined to find himself an outlaw instead of an osteopath?

We will be pleased to hear from anyone in or out of the profession on this matter, and the facts, when submitted to us, we will take pleasure to present to the proper authorities.

We would undertake the leadership in making a test case of this offensive diploma mill if any reliable facts can be put in our possession with which to combat it. Personally, we know nothing about the institution except that its advertisements are a disgrace, and we think they, unsupported by other evidence, would tend to convict the backers and employes of the scheme of fraud before any fair-minded United States court judge.

What about it, brethren?

"In the Spring a Young Man's Fancy."

NEED A DOCTOR?



This case is at a very critical stage. Call in a minister. \$3.00 please.

TRY DAN CUPID, M.D.

NEED A DOCTOR?



Young man, you need something to build you up. \$4.00 please.

TRY DAN CUPID, M.D.

NEED A DOCTOR?



That tight feeling about the chest is nothing serious! It's a common complaint among girls, and without \$4.00 please.

TRY DAN CUPID, M.D.

NEED A DOCTOR?



You're getting at the seat of his trouble all right, m.i.s.s. \$3.00 please.

TRY DAN CUPID, M.D.

The Keeley Cure Proven to Be a Faith Cure After All.

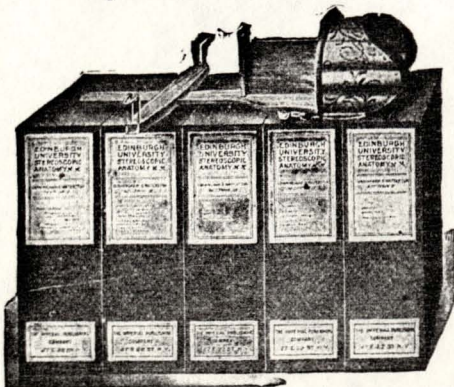
THE power of faith in healing has had a new illustration recently with the exposure of the real chemical nature of the alleged "double chloride of gold" treatment for inebriety, so long in successful vogue by the Keeley Institute. A recent law suit in the United States Circuit Court of Appeals by the Leslie E. Keeley Company of Dwight, Ill., to restrain a former partner and officer in the institution from running a rival cure, was lost by the parent company.

The court dismissed the case on the grounds that the Keeley Company had been practicing fraud and did not come into court "with clean hands." In the evidence the nature of the "gold cure" was very fully "ex-

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ANDREW TAYLOR STILL, M. D.

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Imperial Publishing Co., 27 E. 22d St., New York

posed," and was shown not to rest on any real chemical or pharmaceutical basis for curative purposes, but to be, on the contrary, entirely a placebo.

The defendant in this case was Fred B. Hargreaves, Keeley's partner in founding the institute and his right-hand man until Dr. Keeley died. He testified on the stand that there was no gold in the cure and never had been, and that, notwithstanding the pretty general respect which the medical profession became to give Dr. Keeley before he died for the really good work he did in rescuing drunkards, that the gold basis of his cure rested originally upon bunco, flim-flam and false pretenses.

Hargreaves testified that there was no need whatever in administering the Keeley dope by hypodermic injection, but that that feature had been added to the treatment as a part of the daily routine, in order to give patients something to think about and hold them in line at the sanatoria for treatment, instead of letting them swallow a few spoonful of stuff at home.

The object of this court fight is to clearly establish that the Keeley cure, after all, with all the good work that it has done—and nobody should wish to minimize this good work in the least, notwithstanding the discovery of false pretense as to its methods—is a faith cure, a mind cure, and never had any justification for using the name of "double chloride of gold," which all chemists know was a fake name in the first place, since no such substance is known.

Here, then, is another chapter to show the great importance of mental therapeutics and the dwindling of drug therapy. I wish we had room in this issue to reproduce the full testimony which developed at this trial. The M. D.'s, of course, have given it wide testimony. The *Illinois Medical Journal* commented as follows:

"We thus see that Dr. Keeley's memory must go down to posterity—instead of being honored and revered—as a common swindler and faker, and the institution at Dwight will probably soon pass into history as another example of the gullibility of the public."

While the basis of this indictment is true, we dissent from it and say that Dr. Keeley even as a faker is entitled to great praise for restoring countless thousands of inebriates to useful walks in life, and that credit can never be taken away from him, however deplorable and apparently foolish his blunder was in stooping to fakery, which of itself cannot be too heartily condemned. We have no excuse to offer for the errors that tarnish the fame of the father of the Keeley cure, but while denouncing his professional mistakes, we should not forget that he did a great deal of good. It is true, however, that Dr. Keeley might have done vastly more good by adhering to the straight and narrow way. The *Journal of the Medical Association* printed pages of testimony, followed by a lengthy analysis of the court finding, and it would pay any osteopath interested in reading the history of the concern to write to the *Journal of the American Medical Association*, Dearborn avenue, Chicago, to get these copies containing this record.

Want More Light
on Smallpox.

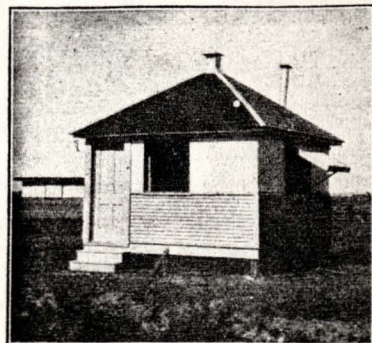
FOLLOWING our discussion of the Anti-Compulsory Vaccination movement, in which osteopaths have participated in several states, we have received numerous requests from practitioners desiring positive information on the subject of smallpox and vaccination. It is complained that most of the references to this subject have been negations, saying only what vaccination would not do,

W. A. Johnson, Pres. R. H. Kemp, Sec'y and Treas.
Will Prager, V-Pres. Mary H. Parsons, D.O., Matron
C. L. Parsons, D. O., Lessee and Gen. Mgr.

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EDITOR

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etc., and that light is wanted on what forms of treatment are really efficacious.

Dr. A. L. Bryan, Gainesville, Texas, writes as follows:

It was recently my privilege to treat my first case of smallpox up to the eruptive stage, at which time I turned it over to the city physician. I applied a Spanish fly plaster to those under my influence that were exposed—about fifteen people—two of whom were retained with the patient throughout the attack, being constantly exposed, they being mother and two daughters, age 16 and 10. The case was quite a typical one, being well marked.

One year ago I applied it to two persons that were exposed to a patient during the eruptive stage. No one has taken it from the former, of whom I consider only the two girls good tests. They had been vaccinated some years previous. McConnell in his old work says the disease is contagious throughout the attack. Some other authors are not so positive, but think the popular opinion is that there is little or no danger during the first few days or until vesiculous formation.

Now to the point. I am persuaded that there are quite a number of us that are not as well posted as we should be upon this subject. If there is any definite knowledge to be gotten I would like to get in possession of it. There seems to be nothing in literature except that we oppose vaccination. We have compulsory vaccination in the schools here. I am not posted as to state law. If you can help me by an editorial or personal letter I will be grateful.

What I want is what we affirm—not what we deny. Support of our position. Am I the only one in the profession lacking this knowledge or self-reliance to stay by it? I believe an article in The O. P. along this line will do good. Where do we stand anyway?

Since writing the above I note Dr. O. J. Snyder's article in March A. O. A. Journal. It seems that there are others just where I am. Can you help?

Fraternally yours,

A. L. BRYAN, D. O.

We print this to invite some of the more experienced members of our profession to speak on these points authoritatively for the profession. We don't know. Who does? Who has had the experience? We haven't.

Wants Facts About Serums.

Dr. James Decker, of Stafford, Kansas, writes us as follows:

"I am much interested in this discussion. I want to know several things. I would like to know the explanation of our osteopathic theory and attitude toward serums—especially in diphtheria, croup, etc. I desire truths instead of theories, and if a thing is a life-saver I wish to admit it and take off my hat to it. We hear references to germ diseases and osteopathy being a specific for them. Do I understand that it is claimed by the leading people in our profession that all specific infection can be successfully treated osteopathically?"

"In 1901 we lost a little girl seven years old. This child died of membranous croup. During Christmas week of last year we had a boy eight years old contract it. I treated him thoroughly and repeatedly, but the membrane rapidly formed. He became almost suffocated. Then I resorted to diphtheroetic antitoxin and got positive relief in five hours. The membrane came away and in great slugs. He recovered.

"Do you and the profession recognize and use antitoxin? Was my treatment efficient? Could you and any other D. O. have cured the child without the use of serums? What about it? Is antitoxine serum considered a drug? Will you please discuss this question in the columns of The O. P.? Perhaps I can get some valuable information along this line.

The editor referred this letter to Dr. J. Martin Littlejohn of the American College of

DR. H. L. CHILES, Secretary A. O. A., 118 Metcalf Building, Auburn, N. Y.:

Please present my name to the Trustees as an applicant for membership in the American Osteopathic Association.

I enclose Five Dollars (\$5.00), the membership fee, with the understanding that it is to be returned in case my application is rejected.

In case I am elected to membership in the A. O. A. I promise to comply with the requirements of the constitution and to deport myself in accordance with the principles embodied in the code of ethics.

Immediately prior to beginning the study of osteopathy I was a resident of (town or city).....(state).....

where I was engaged in (business, vocation or profession).....

.....at (street and No.).....

I attended.....College of Osteopathy during my first semester, date.....I attended.....

.....College of Osteopathy during my second semester, date.....

I attended.....College

of Osteopathy during my third semester, I graduated from.....

.....

College of Osteopathy, date.....

I began the practice of osteopathy at.....

.....

I have since practiced in the following places:.....

.....

.....

.....

.....

.....

I am now practicing at (street No., or office building and No.).....

.....(town or city):.....

(state).....Signature (as I wish my name to

appear in the A. O. A. directory).....

NOTE.—No application will be acted upon by the Trustees unless it is accompanied by the membership fee, such fee to be dues for the current year.

Each applicant for admission to membership must be vouched for in writing by two members of the A. O. A., who are residents of the same state as the applicant.

The above applicant is recommended by:

1.

2.

.....

.....

Approved by the Trustees.....

Date.....

.....

Osteopathic Medicine and Surgery for an opinion, the point at issue being, "Are serums osteopathic or unosteopathic?" Dr. Littlejohn replied as follows:

"Yours with inclosure received: I have read Dr. Decker's letter. Of course I am not in a position to answer for the profession. I can only say for myself that I consider antitoxin as unosteopathic. I believe it is in the same class as vaccine virus. I believe some osteopaths use and recognize it. I believe that in the first place the way it is prepared in horse lymph, the latter being a foreign substance, makes it detrimental to the system. The last few issues of the American Medical Association Journal have noted cases in which horse serum is exceedingly detrimental and

even fatal. One writer points out that this is especially the case if uric acid is present in the system.

"Secondly, I believe that all such lymph or serum treatments fail to come up to the standard of osteopathic adjustment. I consider the serum a drug. It is an attenuated toxin in a foreign medium. I do not consider it antidotal in its action and for that reason I believe it falls short of expectations. Personally I have treated diphtheria both in child and adult and have never felt the need of any aid for antitoxin.

"I think you would do good work by discussing this subject. It certainly is a very pressing problem—What to do when we face death? Are we equal to the emergency? This

Educate Your Field.

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During the months of June and July I anticipate making a tour of some of the Northern and Western States and Canada, explaining in a popular manner the truths of Osteopathy and telling the story of its growth. If you have not received circular matter from me and considered at all having me lecture in your town, let me know at once. My lecture engagements must be settled by the end of the first week in May, so there is no time for procrastination. If six towns or more in any State situated north or west desire lectures, very favorable terms can be had. Medical associations, Christian Scientists and others are employing the lecture method to extend their work and promulgate fallacies regarding Osteopathy, and this is the only means to counteract such.

First hour devoted to a popular scientific explanation of Osteopathy and its principles, contrasted with other methods. Second hour illustrated with stereopticon views, telling its history. Questions of medical men and others invited at every lecture, and not one word uttered to stir up hostility. Press opinions furnished if desired. Address,

William Smith, M. D., D. O.
Kirksville, Missouri

subject of serums, into which modern medicine seems to be drifting, is a real live issue and I believe we should meet and face the question by discussion. It is called biological medicine. I believe, however, it is unbiological. The horse represents an antipathy to the human subject and as such to use it as a medium I believe is a false principle of therapeutics."

Same With Practice.

If your business is good, advertise to keep it so. It is always better to look ahead and prepare than to look back and regret.—*Publicity.*

President Browne of Illinois Does Wonders.

Dr. E. M. Browne, president of the Illinois Osteopathic Association, is a hero in the ranks of osteopathic workers, and is entitled to all the honors that his Illinois confreres can give him. Under his executive guidance and directed by his genius of organization, the Illinois state society and the various sub-societies have now sprung forth into newness and life.

For a long time it had almost been despaired in this flourishing state where osteopaths are so numerous—and good ones, too—that there ever would be a good, thorough-going and united state osteopathic organization. That fear is now rapidly dispelling.

"President Browne has taken a broken down, spavin old horse," as Dr. Fred W. Gage says, "and turned him into a first class trotter." That tells the story of the work that is now all but completed. District after district has been visited and thoroughly organized by President Browne, and it is now certain that when the next annual meeting of the state organization is held—only a few weeks off—it will be the most united, enthusiastic and biggest meeting ever pulled off by the Illinois osteopaths. Dr. Browne has earned the endorsement of his fellow osteopaths and he should enjoy re-election for another term.

Among other achievements of his administration, President Browne has just succeeded in lifting a debt of \$445 which has been hanging over the association for some time. This amount was squared off by private subscriptions among the membership. The tactfulness of President Browne and his trustees in handling the various problems that have beset the association is entitled to wide praise and emulation.

Meyers Not an Osteopath.

L. F. Meyers, the alleged osteopath (alleged by the Associated Press), of Columbus, Ga., who was shot in the head by a dippy patient last month, turns out to be a correspondence course mechano-therapy chap.

Good Influx at L. A. C. O.

The Los Angeles College of Osteopathy wrote us February 26 that it had already matriculated thirty-six new students for the opening term, thereby surpassing its own expectations.

Chiroenergy.

Both Virginia and Washington have up chiropractic bills. Also they say the chiro forces are collecting money for defense in Wisconsin. So the palmerpraxillites are still busy.

Successful Hip Reduction.

Noticing a recent article in *The O. P.* about the reduction of a congenital dislocation of the hip which was performed at York, Pa., I am tempted to tell you that I treated a similar case in 1906. After an X-ray photo was made the case was treated for two months. Then, with the assistance of an I. D. and a D. B. S., who administered the anesthetic, the reduction was made and cast applied. The X-ray photo was shown

to Dr. Geo. Laughlin when he was the guest of the Greater New York Osteopathic Society in December, 1906. His advice for future treatment was given. Early in 1907 the patient, a girl of less than four years, was ready to walk. Now the child romps and plays like other children and is apparently as strong. So that in this case the operation was a perfect success. The case was sent to me by an M. D. who is a graduate of the University of Pennsylvania and has a fairly large practice.—*Fraternally yours, H. R. Kellogg, Lancaster, Pa.*

How Dr. "Bill" Helps the Cause.

I lectured at New Franklin, Mo., February 15th and had a good audience who listened most attentively and appreciatively. This morning one of the local M. D.'s thanked me for the lecture, saying that it had cleared in his mind many points regarding osteopathic practice and made him see that it had a definite, scientific basis. That is what we want, the education of the people and the doctors. Do not have the latter criticising a thing of which they know nothing. Let a man who knows both practices tell them fairly and squarely where Osteopathy succeeds when drugs fail, and why it does so, and ask them to refute his words. That is what I do at every meeting—not a harsh word to the doctors, but a request to them that if I say a word which is untrue they will call me down. *William Smith, M. D., D. O., Kirksville, Mo.*

Well to be Particular.

William S. Gilbert's punctiliousness in the matter of good English is well known. The famous composer was one day standing outside his club, where he was met by a man who said: "I beg your pardon, sir, but do you know a gentleman, a member of this club, with one eye called Matthew?"

"I can't say I do," responded Mr. Gilbert. "What is the name of his other eye?"

Don't Forget Next August.

Be sure and make your plans to attend the big rally at Kirksville next summer. The landau is being arranged for and there will be enough rope to give every osteopath who journeys back to our mecca a hand to help to draw Father Mother Still around the municipality. The line of march has been proposed to begin from the A. S. O., along Jefferson street to Main, around the Square west and north to High street, through High street to Normal avenue, and through Franklin back to Jefferson, then back to the A. S. O., with the band leading the march and 3,000 osteopaths in line. We expect a grateful time of it. Make your plans to be present.

Chronic Rhinitis.

Chronic rhinitis is an inflammation of the nasal mucosa, resulting usually from oft repeated occurrences of the acute disease. The mucous membrane is thickened and interstitial infiltration with more or less complete nasal stenosis results. The treatment is general and local. Regulation of the primae viae and the upbuilding of the general system are especially indicated. Locally the nasal passages require the cleansing and purgative effect of alkaline douches. For these purposes Glyco-Thymoline stands first in the list of remedies. It should be used as a douche in the proportion of one part to three of water, three or four times a day.—*American Journal of Dermatology.*

Dr. Booth Answers.

The *Lancet-Clinic* of February 8th printed an article on "The Fallacy of Osteopathy," which Dr. E. R. Booth made a practical reply to, published in the issue of February 22nd. That is proper and as it should be. Whenever traducers of osteopathy rush into publications with false statements regarding our

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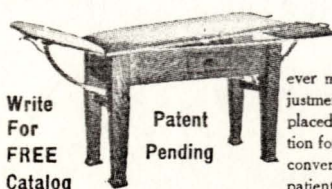
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LAST WORD!

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science and practice, it is proper to "call them" and put the facts before the public. No osteopath has any business letting an M. D. class Dr. Still with Mrs. Eddy and John Alexander Dowie without resenting the insult, and at the same time using the opportunity to give osteopathy free advertising.

Dr. Kerr as Librettist.

Dr. Clarence Vincent Kerr, of Cleveland, who won considerable histrionic fame last year writing a play, *The Hermits in California*, for a local social organization known as "The Hermits in Dixie," which will be staged at the Opera House, May 25 to 30, 1908. This is a very strong social organization, noted for its exclusiveness, and numbers several hundred of the most prominent young men of the city. Dr. Kerr made a great hit with his play last year, and it is expected that he will exceed his own fame this year. We would not be surprised at any time to hear of Clarence giving up practice to get into the George Ade class.

Dr. Charley Still Strikes Luck.

Dr. Charles E. Still called upon the editor of *The O. P.* early in April and received congratulations over the leasing of mining privileges for his farm at Kirksville at a very satisfactory royalty figure. It may not be known to all the profession that a rich coal deposit has been struck in Kirksville just west of the A. S. O., on Dr. "Charlie's" farm and the other lands immediately west. An extensive corporation has been formed to mine coal, and in all likelihood Kirksville is destined to blossom forth at an early date as a manufacturing city. Instead of going into coal mining himself, however, Dr. Charlie prefers to rent the bowels of his earth to mining corporations and continue to run his fine stock farm upon the surface under God's own sunshine, incidentally to looking after the interests of the school and infirmary. We congratulate Dr. "Charlie" on his luck.

August 6th—Kirksville.

Keep your mind on the week of August 6th, at Kirksville. You will make the mistake of your life if you fail to come to attend the jubilee of Dr. A. T. Still and his children of osteopathy on that occasion.

Wants Osteopath Under Contract.

Dr. G. L. Copeland, Covington, Tenn., wrote us on March 29th that he wanted to make a contract with a good young osteopath to become his assistant on a monthly salary basis to help him to take care of a company's contract practice in the state of West Virginia. He asks for correspondence and reference. Those who write him will please refer to *The O. P.* as the source of their information.

California State Meeting.

The California State Osteopathic Association meets in Fresno, May 28th, 29th and 30th. We have received a cordial invitation from Dr. Sarah T. Pugh to be present, and all osteopaths who can visit Fresno at that time will be doubly welcome.

"Heart Failure" a Hit.

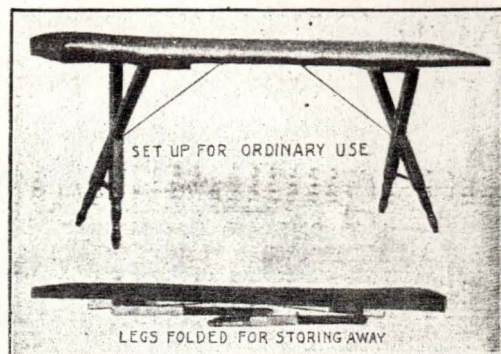
Your talk on "Heart Failure" was a winner, and I am not surprised that it elicited so many favorable comments.—Dr. S. S. Still, Des Moines, Iowa, March 28, 1908.

Up the Hudson Conference.

The Albany district of the Osteopathic Society held a meeting at the office of Dr. Mae V. D. Hart in Albany, April 9th. Dr. Mary McDowell of this city read a paper on "Lesions of the Lower Extremities," Dr. Harriet Owen of Hoosick Falls read a paper on "The Digestive System," and Dr. Mae V. D. Hart

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gave a paper on "Pelvic Disorders." Each paper was followed by a discussion. About twenty osteopaths were present from Troy, Schenectady, Amsterdam, Hudson, Glens Falls and Gilbertsville.—*Troy (N. Y.) Record.*

Allegheny's New Officers.

At the regular meeting of the Osteopathic Society of Allegheny County, held in the East End, March 30th, the following officers were chosen for the coming year: President, Dr. W. L. Grubb; vice-president, Dr. B. White; secretary, Dr. M. Husk; treasurer, Dr. Harry M. Goehring. After the business meeting a lunch was served.—*Pittsburg (Pa.) Dispatch.*

I. T. S. Reach Des Moines.

Twelve Still College students became charter members of the local chapter of the national osteopathic fraternity, the Iou Tau Sigma, March 13th. A delegation from the Kirksville (Mo.) college was present to carry out the ritual. The installation took place at the Kirkwood Hotel.—*Des Moines Capital.*

Osteopath Not Guilty.

In the case of the state against Dr. Isabel Karney, of Spokane, Wash., charged before Justice of the Peace Samuel C. Hyde with violation of the state medical laws, a jury of six returned a verdict of not guilty, March 12th. W. T. Birdsall appeared on behalf of the state and W. L. Dirks for the defendant.—*Spokane (Wash.) Review.*

Dr. Emeny Shot.

Dr. H. W. Emeny, a prominent osteopath of Eldora, was shot in the breast on the morning of April 9th by Edw. Nuckolls, a well-known young man, as Emeny was trying to enter Nuckolls' home when, it is claimed, Emeny thought Nuckolls was absent. Dr. Emeny is in the Emergency hospital, and it is stated that it is not known what the outcome will be.—*Des Moines (Ia.) Capital.*

Colorado Springs Organized.

Osteopaths of Colorado Springs and Colorado City met in the Y. M. C. A. building April 2nd and organized a city association. The following officers were elected: Dr. J. D. Glover, president; Dr. C. S. Klein, vice-president; Dr. M. Jeannette Stockton, secretary-treasurer. The osteopaths present were Drs. J. W. McNeil, J. D. Glover, E. E. Conway, C. S. Klein, E. D. Mummah, Leone G. Pauly, G. L. Summers, Adel A. Allison, Joannah Campbell. Meetings will be held the first Thursday of each month. The next meeting will be held with Dr. Glover on East Kiowa street.—*Colorado Springs Telegraph.*

Southwestern Missouri Organized.

Dr. Truman Wolf, of Carthage, is president of a new osteopathic association formed at Joplin March 30th, when a good representation of the osteopathic physicians of this region met at the office of Dr. Minerva Kenaga in Joplin and organized for the purpose of increasing friendly relations and educational advantages. The society will be known as the Southwestern Missouri and Southeastern Kansas Osteopathic Association. Meetings will be held the last Saturday in each month in different towns of the association's territory. The next meeting is to be held in the office of Dr. Loyd D. Gass, in Joplin, on April 25 at 7:30 p. m. Officers elected last night for the coming six months as follows: Dr. Truman Wolf, of this city, president; Dr. Josephine Trabue, Pittsburg, Kan., vice president; Dr. Florence Gustin, Lamar, secretary.—*Carthage, Mo., Press.*

Utah Folk Celebrate.

A meeting of the Utah Osteopath Society was held March 18th, at the home of Dr. Mary Gamble, 177 I street, Salt Lake City, at which were present a majority of the members resi-

dent in the state. Owing to the fact that some officers of the association were unable to attend, the annual election was postponed for one week. A paper on "Hygiene and Dietetics," prepared by Dr. G. A. Gamble, one of the absentees, was read by Dr. E. E. Keeler. Dr. Alice Houghton spoke on "Women as Physicians," and both subjects were discussed by Drs. J. C. Woodmansee, Grace Stratton, Keeler, Mary Gamble, W. S. Ramer, H. Phillips and others. A banquet followed the rendition of the first part of the program, a number of invited guests sitting at table with the members of the society. Dr. Keeler was toastmaster, and a number of responses were made. A steady growth in the profession of osteopathy and a corresponding increase in the number of practitioners in this state were reported. A toast offered in honor of Dr. A. T. Still, of Kirksville, Mo., originator of osteopathy, and who will shortly reach the 80th milestone of life, brought the assembly to their feet as the response was made.—*Salt Lake City Herald.*

Dr. Spangler Acquitted in St. John, N. B.

St. John, N. B., April 3.—A case brought by the New Brunswick Council of Physicians and Surgeons against Dr. H. L. Spangler, osteopathist, charging that his practice is a violation of the medical act, was concluded today before Judge Ritchie. Dr. Spangler won, and the case was dismissed. This is the second time an effort to secure a conviction has failed. Several citizens testified to being treated by Dr. Spangler. Judge Ritchie, in summing up, said: "As regards the matter of diagnosis, I am not sure it was necessary that we should know whether or not Dr. Spangler knew what was wrong with the patients. The question is, what is the law and did he violate it? I am of the opinion that the treatment of these witnesses, as given in their testimony, by the manipulation or laying on of hands, does not constitute the practice of physics, surgery or midwifery, and the prosecution has failed to make a case. The defendant will be discharged." Hon. J. D. Hazen asked for costs and counsel will be heard later on this question. Hon. C. N. Skinner appeared for the prosecution.—*Toronto Globe, April 4.*

To Non-Members of the Profession.

April 5, 1908.
The constitution of the A. O. A. provides that all applicants for membership shall enjoy fifteen months' membership in consideration of one year's dues of \$5, provided they join within three months of the annual convention. Thus, from the standpoint of an investor, this is an opportune time for you to enter the membership of the American Osteopathic Association. We have written you several times during the past year, presenting arguments why you should become a member of the national organization. You have responded by tens when you should have rushed in by hundreds.

Now, doctor, we feel that you have the success of osteopathy at heart, and if you realize the activity and complete organization of the American Medical Association and its efforts to curb our limitations, and do not become a member of this association, which stands opposed to the efforts of the big monopoly, we must believe that you are not familiar with the earnestness of the A. O. A. and its officers.

We have appealed to you at various times on the ground of the many benefits you would receive from membership, calling attention to the scientific journal of the association, case reports, quarterly directory of members, membership certificate and the active interest of officers and committees in your various local efforts.

For you to progress personally, which means the advancement of osteopathy, we must work in harmonious accord with an organized purpose. When we rest on our oars, the death

knell begins to sound, hence can you not see that unless you co-operate with your fellow practitioners in this national effort you are sounding your own limitations? No greater responsibility rests upon the American Osteopathic Association than its efforts to preserve the cardinal principles of osteopathy, as delivered to us by Dr. A. T. Still. Does this not deserve your co-operation? Upon the success of these efforts depends the weal or woe of osteopathy as an independent system of therapeutics.

Of course you are going to the great Kirksville convention. Member and non-member welcome alike. It will be held there with the one purpose of showing due honor to our illustrious founder on his eightieth birthday.

If I may supply you with an application blank or in other ways serve you, address me. This invitation is extended by President Moore through
Yours fraternally,
F. E. MOORE, D. O.,
President, A. O. A.

Tuberculosis is "Sometimes" Curable

I quote from the *Register and Leader*:

"One feature of the congress that is of more than ordinary interest will be the address of Dr. Kime of Fort Dodge on 'Tuberculosis.' Dr. Kime is the only man in the world who has discovered a sure cure for the dread disease and a large audience will undoubtedly gather at the hall to hear him. This is the only part of the programme which will be open to the public."

Retreating footsteps of the newsboy who had delivered the morning paper were becoming fainter and fainter as I scanned the first page, and my eye caught this remarkable paragraph. The sound of the approaching express wagon grew louder and louder, and in a few moments the third volume of the seventeenth series of the International Clinic was delivered to me. I threw down the paper, picked up the volume and turned over the pages to learn the contents, when I discovered on page 50 an article with this title: "Curability of Tuberculosis—By E. S. Bullock, M. D.," which I also quote:

"As time passes and experience aids me in drawing conclusions somewhat independently of my conferees, I am frank to say that a great deal of nonsense has been written and expressed about the curability of tuberculosis. I have reference particularly to the pulmonary type of this disease. The human race has been afflicted with consumption for thousands of years, and for thousands of years people have been dying of it. No 'cure' has been discovered that I am aware of, and yet we hastily remove tuberculosis from the list of incurable diseases and class it as curable. We doctors have some failings, and the chase for a will-o'-the-wisp is often one of them. In this matter as in others the truth is more likely found in the mean than the extreme, and my friend, Doctor Musser, is perfectly right when he says 'tuberculosis is sometimes curable.'"

S. S. STILL, D. O.

316 Cent. Building, Des Moines.

Publisher's Department
Lots of Originality
in This Number

THE May issue of *Osteopathic Health* is a strong one, containing several articles that put osteopathy to the people in attractive and pleasing colors. There is a considerable quantity of short stuff in this issue—more than has been used before for many months.

One of the features of the paper is a chatty, interesting story between a physician and a mother regarding the health of a sickly daugh-

ter, which is entitled *Passing the Dangers of Puberty*. It is by Dr. Lester R. Daniels, and is written in a chatty way that will make it interesting to every one.

Physicians Bid Farewell to Drugs is in the main a quotation from the recent pronouncement of the Doctors Mitchell of East Aurora, N. Y., who retired from the practice of medicine after apparently having reached the pinnacle of success in its administration for the size of the field in which they labored. Without sensationalism or extravaganza, these physicians went on record in a convincing way in saying that they believed most people would be very much better off if drugs were not used in practice and that for their part, at least, they no longer could consent to represent a system that they could not honestly believe in. They give reasons in a simple, convincing way.

The osteopathic comments on their utterances are mild and temperate, the editor preferring to let the M. D.'s themselves speak of the weaknesses and disappointments of their own system of practice, rather than offer osteopathic evidence to that effect. This is immeasurably stronger as a position for us D. O.'s and in this connection it is timely to say that *Osteopathic Health* for one has entirely quit saying harsh things about the M. D. and drug-giving, no matter how true we may know them to be. We do not believe it best in the long run for osteopaths to be too vehement about the defects of drug practice, no matter how true the things are which they say. We do believe, however, that it is splendid missionary work for osteopathy to quote representative M. D.'s whenever they go on record, as have the Doctors Mitchell, as to the errors of their own practice. The conclusion of our quotation is to invite the Doctors Mitchell to investigate osteopathy, believing that they would find in our system all that they fail to find in the allopathic practice.

Napoleon Bonaparte once went on record very strongly against drugs for the sick. He is quoted in this issue from Emerson's *Representative Men*.

Errors Regarding Osteopathy Corrected is a series of short paragraphs, each of which is devoted to explaining away some one common misapprehension regarding osteopathy which is encountered on every hand among average people. A glance at this feature will show the value of this item, condensed, as it is, in this number.

For Cure—Not for Pleasure, is an article worth its weight in gold to the practitioner. It makes the patient appreciate that the osteopath is not a rubber, who simple hauls patients about to give them a grateful feeling and a substitute for hard labor. It makes patients understand that what they are taking treatment for is to cure disease or deformity, and not to receive a good feeling immediately afterwards. It warns them that many of the "premonitory symptoms" of recovery actually

make them feel worse for a time—all of which is good, educational work to give our patients.

The Alcohol Habit—Delirium Tremens, is a timely article from the pen of Dr. E. E. Tucker. It is full of new osteopathic talk, and will be read by most people with interest because of its originality. Perhaps it will be new to most osteopaths that osteopathic treatment is good for the liquor habit and can allay the tortures of delirium tremens, but Dr. Tucker makes the point stick that it can, and shows *how* and *why*.

Chronic Gastritis, is a good sensible talk by Dr. J. R. McDougall, which will strike a responsive chord in the hearts of most people, whether they have ever suffered from chronic gastritis or other forms of stomach trouble or not. Our practitioners also will approve of the common sense of this story in large numbers. Dr. McDougall puts the case before the people without any flub-dub, and, incidentally, without seeming to make any effort to do it. He tells the average reading and thinking person a whole lot about digestion and diet, health, dyspepsia and gastritis, which he will be glad to learn about.

There is not much talk about osteopathy apparently in this article, it seeming to be mainly about diet, digestion and all that. Yet, when the article is finished, everyone who reads it will have a new appreciation of the fact that osteopathy treats these cases with marked success, and in a wholly new way, making use of all that science and common sense proves as adjunctive to the regulation of the nerve and blood supply to the stomach and digestive tract through tissue adjustment and nerve stimulation. This is quite a pretentious article in length and it is very timely in this issue.

Taking it on the whole, this number of *Osteopathic Health* is an exceedingly good one, and we predict that it will not be able to sell as a back number. Our friends will remember that about three times in every four when we predicted this in the past, our entire issues have been sold out before the end of the current month.

Practice Open.

I have purchased the practice of Drs. W. H. & Josephine Leffler, of Herkimer, N. Y., so my address since April 1st has been Earl block, Herkimer, N. Y. Anyone wishing to locate at Little Falls, kindly write me and I will give them all the information possible. It is a city of about 12,000 population.—Dr. Charles A. Kaiser, Earl Block, Herkimer, N. Y.

Would Take Charge of California Practice for Summer.

Kindly insert in The O. P. that I will take a practice during the summer months in California. I am a graduate of A. S. O., class '03, and can begin May 15, 1908. I have license to practice in California and expect to locate there. I am temporarily in Kansas City, taking a medical course and will finish May 7th. Yours fraternally, E. A. Montague, 807A Forest avenue, Kansas City, Mo.

Wants to Practice North During Summer.

I am anxious to get out of the extreme heat here at Brunswick, Ga., this summer and I would like a location for July, August and September. I get very much run down during the long hot months here and contemplate closing my office during that time if I can get an opening elsewhere. If you know of any one who wants a vacation or if you have inquiries for a D. O. at any resort I would appreciate your putting me next. Fraternally and truly yours, J. W. Gorin, D. O., Box 184, Brunswick, Ga.

McKeesport Practice Open.

I am sorry to tell you that I am going to leave McKeesport. The house I occupy has been sold, so we are compelled to move, and we have decided to move to Somerset, Pa. If you know a good D. O. who is looking for a location and wishes to come to McKeesport, I will gladly give him what practice I have and assist him all I can. This is a good location for a first class D. O.—O. C. Mutschler, 439 Shaw avenue, McKeesport, Pa.

The Only Way.

"Insomnia" said Dr. Kidder. "Well, there's only one way to get rid of that."
"And what is that, doctor?" asked the patient.
"Go to sleep and forget all about it."—Philadelphia Press.

Osteopathic Proof.

He bet his last dollar on the Bay,
The race went to the Roan,
And so his health and his chance to wealth
Was wrecked by a misplaced "bone."
—W. S. Peirce, D. O., Lima, Ohio.

At the Root of It.

Miss Suburb—Father wants something to prevent baldness.
Drug Clerk—Why doesn't he get a divorce?—Telegram.

In the "B" Class.

Mary had a swarm of bees
And they to save their lives
Must go wherever Mary went—
'Cause Mary had the hives.
—W. S. Pierce, D. O., Lima, Ohio.

The Osteopathic Mother Goose.

Freshman! Freshman! Can you tell
What will make a sick man well?
Snap his neck and thump his back,
Squeeze his ribs to make them crack,
Pull his leg and twist his knee,
Amputate a good fat fee.
—Dr. A. J. C. Saunier.

The Excessively Good Man.

"He has no enemies," you say;
My friend, your boast is poor:
He who hath mingled in the fray
Of duty that the brave endure
Must have made foes. If he has none,
Small is the work that he has done.
He has hit no traitor on the hip;
He has cast no cup from perjured lip;
He has never turned the wrong to right—
He has been a coward in the fight.
—New York Times.

Personals.

Dr. R. F. Graham, who has been out of practice all winter, has recently returned from San Antonio, Texas, where he has spent most of his time, and has again resumed practice at Batavia, N. Y.

Dr. Chas. A. Kaiser, formerly of Little Falls, N. Y., has purchased the practice of Drs. W. H. & Josephine Leffler, of Herkimer, N. Y.

Dr. W. B. Van de Sand, of Kansas City, Mo., who opened a branch office at Bonner Springs, Kansas, is doing so well there that he is spending most of his time at that place.

Dr. John Murray, of Trenton, N. J., has removed his office to the new building recently completed and arranged especially for his practice, at 212 East Hanover street.

Dr. J. J. Schmidt, who has recently located in Vinita, Okla., reports to us that he is doing very nicely there for the short time he has been there and expects to build up a flourishing practice before very long.

Drs. C. W. & Estella M. Gray, of Hornell, N. Y., have opened offices at No. 1 Hakes avenue.

Dr. Warren B. Davis, of Milwaukee, Wis., was seized with an attack of sudden illness while riding down-town. The car was stopped and the police ambulance was sent for, which conveyed the unconscious physician to the office of a doctor. Dr. Davis recovered sufficiently to be taken to his home.

Dr. W. H. Heagney is assisting Dr. Asa Willard in his practice at Missoula, Mont.

Dr. H. S. Amussen, of Logan, Utah, sailed December 6th, 1907, for the Pacific Isles, intending to visit the Hawaii and Fiji Islands. He will spend most of his time in Australia.

Dr. R. A. Ellis, of Denver, Colo., has been visiting some osteopathic friends in Portland, Ore.

Dr. Clarence Vincent Kerr, who wrote the much complimented play put on by the "Hermit's Club" of Cleveland, last year, has been

MAY ISSUE

Contents of "Osteopathic Health" for May are:

Health Notes

Passing the Dangers of Puberty
Lester R. Daniels, D. O.

Physicians Bid Farewell to Drugs
Henry Stanhope Bunting, A. B., D. O., M. D.

Napoleon Bonaparte on Medicine
Ralph Waldo Emerson

Errors Regarding Osteopathy Corrected

For Cure—Not For Pleasure

The Alcohol Habit
E. E. Tucker, D. O.

Chronic Gastritis
J. R. McDougall, D. O.

It is a good forceful number, full of interest and new thoughts for your patients. Order to-day.

THE OSTEOPATHIC PHYSICIAN CO.
171 Washington St. Chicago

A Great Talk to Women

is found in the February issue of *Osteopathic Health*. It is bound to raise the quotation on osteopathic stock wherever it circulates. Find a lay woman who will not read it when she has the chance and you'll have a freak—a real phenomenon. They'll all read it if you let them. Do you realize that probably three-fourths of our patients are women, and probably nine-tenths of our patients are sent to us by women? That will suggest how profitable it will be to you to suggest this February issue widely.

THE OSTEOPATHIC PUBLISHING COMPANY
171 Washington Street : : CHICAGO

commissioned by the "Hermits" to write the play again this year, which is entitled "The Hermits in Dixie."

Dr. F. C. Hill, of Homer, Ill., has been away on a sick leave since the middle of February. After returning to practice for a short time, he finds that he is compelled to go again, and probably will have to seek another location on account of his health.

Dr. R. G. Lewis, a classmate of the editor, who has been in California for some time, passed through Chicago on April 14th on his way back to Ohio, where he will re-locate for the practice of his profession.

REMOVALS.

Drs. K. J. and Gertrude Clements, from Waverly, N. Y., to 1045 De Kalb street, Norristown, Pa.

Dr. Mary E. Harwood from 308 N. Y. Life building, to 1423A East Eighth street, Kansas City, Mo. Dr. Harwood now has her office at her residence.

Drs. Frame & Frame from 1118 Penn. building, to 1619 Race street, Philadelphia, Pa.

Dr. C. S. Fisher from Merrill building, Milwaukee, Wis., to 1208 Majestic building, Milwaukee, Wis.

Dr. A. Howard Young from 52 Mechanics block to 435-436 Central block, Pueblo, Colo.

Dr. S. Y. Kennedy from 37 62nd avenue to 54 First avenue, Gloversville, N. Y.

Dr. J. Clinton McFadden from 933 E. Alder street, Walla Walla, Wash., to 444 14th avenue, Pomeroy, Wash.

Dr. H. F. Wright from 374 Webster avenue, Chicago, to 800 Montana street, El Paso, Tex.

Dr. E. E. Tucker from 142 Summit avenue, to 337 Pacific avenue, Jersey City, N. J.

Dr. Howard C. Atwood from 4th and Spring streets, Los Angeles, Cal., to Huntington Beach, Calif.

Dr. Frank A. Sloan from Des Moines, Iowa, to Caldwell, Idaho.

Dr. John H. Murray from 804 Broad street, to 212 E. Hanover street, Trenton, N. J.

Dr. Chas. W. Lineker from 2161 Grove street, to 547 Telegraph avenue, Oakland, Calif.

Dr. J. Ivan Dufur from 35 South 19th street, to more commodious quarters at 411-412 Flanders building, Philadelphia, Pa.

Dr. R. P. Evans from 77 Carroll street, to 405 Press building, Binghamton, N. Y.

Drs. Kaiser & Kaiser from 506 E. Main street, Little Falls, N. Y., to Earl block, Herkimer, N. Y.

Dr. W. C. Williams from McDaniel building, to the Santa Rosa Bank building, Santa Rosa, Cal., which is one of the earthquake-proof buildings built since the quake.

Dr. J. Porter McCormick from 79 E. North street, New Castle, Pa., to 52 Shenango street, Greenville, Pa.

Dr. J. W. Knauss from 65 East Fourth street, to 27 E. Bridge street, Oswego, N. Y.

Dr. John W. Miller from 418 Market street, to 226 Market square, Sunbury, Pa.

Dr. W. F. Murray from Sandwich, Ill., to Yorkville, Ill.

Dr. Delia B. Randel from 715 N. Congress street, Jackson, Miss., to Canton, Miss.

Dr. W. J. Perkins from The Burke building, to The New Schroeder building, Carbondale, Pa.

Dr. M. J. Beets from 720 Felix street, St. Joseph, Mo., to 217 1/2 N. Washington street, Wellington, Kans.

Dr. Franklin Hudson from 100 Princess street, to Lansdowne Crescent, Edinburgh, Scotland.

Born.

To Dr. and Mrs. William C. Wilson, of Wentzville, Mo., April 16th, a son and a daughter.

Dr. William C. Wilson of Wentzville, Mo., is making regular visits to Warrenton, Mo. He is there on Mondays and Thursdays.

To Dr. and Mrs. C. C. Reid of Denver, Colo., March 26th, a seven-and-a-half pound boy.

To Dr. and Mrs. J. A. Linnell, of Chicago, Ill., February 8th, a son, Robert Crosby.

To Dr. and Mrs. J. G. Follett, of Spearfish, S. D., March 20th, a son, Warren Edgar.

Died.

Dr. Charles DeWitt Strubble, of Jacksonville, Fla., March 14th, of cirrhosis of the liver.

Mrs. Hannah B. Taylor, of Jackson, Mich., March 5th, of apoplexy; following an illness of 36 hours. Mrs. Taylor was the mother of Dr. Carrie B. Taylor-Stewart, of Detroit, Mich.

Mrs. Palmer, wife of Dr. H. T. Palmer, of Scranton, Pa., in childbirth, March 11th. The mother lived but four hours; the boy, Charles Robinson, is doing nicely. Deceased was a sister of Dr. Florence Judd Barrows, of Kingman, Kans.

Mrs. Julius A. Quintal, wife of Dr. Julius Quintal, assistant secretary of the A. S. O., at the A. S. O. Hospital, April 6th, of dilation of the heart during an attack of pernicious vomiting. Deceased was a sister of Dr. Minnie Dawson, of Detroit, Mich. She is survived by the husband and three children.

Los Angeles College of Osteopathy

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Charles H. Spencer, D. O., Vice-President,
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Mrs. Jennie C. Spencer, Dean of Women's Dept.

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Who have given instruction to a large proportion of all the regular graduate osteopathic physicians in the world; who make a business of it, not a side line or diversion.

Who love their work, and get the enjoyment of it as they go along.

Who, therefore, selected the ideal homeland, ideal for the study and treatment of disease conditions, and for the pleasure of living meanwhile—

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New five-story, brick, fireproof college building, in the business center of Los Angeles equipped in every detail of laboratories, recitation rooms and treating rooms. For the most advanced osteopathic education.

Here our 250 osteopathic college students of 1908 have best instruction, the maximum of clinic experience and the minimum expense.

Here 35 per cent of our students earn all, or a portion of, their expenses without interference with studies.

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Experienced X-ray diagnosis.

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An up-to-date Institution of 75 rooms, situated on the Mountain Side, in the Ideal Environment for recovery from disease. The Sanitarium is more than 300 feet in length, of two and three stories; Sun Parlor 210 feet long, 150 acres, orchards; famous flower-bearing canyons, waterfalls, mountain hunting; within three miles of Pasadena, 14 miles from Los Angeles. Excellent cuisine, competent attendants and nurses. Billiard, reading and rest rooms.

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City Office: 318 Clay St., Los Angeles.
B. S. WEYMOUTH, Sec., LaManda Park, Cal.

Who Got the Button?

Doctor—"My dear sir, your wife needs change."

Husband—"I know it, doctor, but you took it all."—New York Sun.

Modern Uses.

What are your eyes for?
Lottie (aged one and a half)—To see with.
Mother—And your nose?
Lottie—To smell with.
Mother—And ears?
Lottie—To telephone with.—Jugend.

WANT ADS.

FOR SALE—OLD ESTABLISHED PRACTICE in large eastern city. Reasonable. Good reason for selling. Address 242, care O. P.

WANTED—OSTEOPATHIC PHYSICIAN TO share established offices in Chicago. Down town within loop district. Location and building the best. Access to all transportation lines. Address 243, care The O. P.

EXPERIENCED, EDUCATED OSTEOPATH (4 years member of A. O. A.) wants lucrative position. Would act as assistant, partner, or substitute in general practice; or would buy on monthly payments. Could manage sanatorium. Address 233, care O. P.

FOR SALE—ONE OR TWO FINE OAK BART-let Treating Tables, almost new; light or dark finish; folding head and foot rest; reclining bed. Address A. E. C., care O. P.

N. Y. CITY OFFICE, CENTRAL LOCATION, for rent, two or more days per week. Very reasonable. Address 234, care O. P.

FOR SALE OR RENT—WITH THE PRIVILEGE of buying—First class location in an eastern city of 35,000. Established four years. Having two offices I am obliged to dispose of one. Terms to suit purchaser. Address 235, care O. P.

FOR RENT—MORNING HOURS IN CHICAGO office, central location; pleasant office and reasonable terms. Address 312-57 Washington street.

WANTED—A POSITION AS ASSISTANT OR partnership to a lady D. O., with large practice; prefer northern climate; graduate of American School, June, 1904; young man, age 26, and can deliver the goods. Address Box 34, Tulsa, Okla.

WANTED—POSITION AS ASSISTANT DURING vacation, by Junior of Philadelphia College. Eastern states preferred. Address 236, care O. P.

FOR SALE—A NEW SECOND-HAND CHATTANOOGA Vibrator. Address 237, care O. P.

FOR SALE—A GOOD ESTABLISHED PRACTICE in an Indiana town of 11,000; only osteopath; none but prospective buyers need write. For further information address 238, care O. P.

WANTED—POSITION AS ASSISTANT OR take charge of office for a few months. Have had nearly three years of private practice and have just completed post graduate course. Can give best of reference. Address 239, care O. P.

TO RENT—OFFICE TWO DAYS PER WEEK at 36 W. 35th St., New York City. Address E. H. M., at that address.

WANTED—A LADY PARTNER. DR. F. M. Geeslin will sell half interest in practice and office furniture for \$300. Practice established 2 years. Dr. Florence Geeslin wishes to retire from practice. Address Drs. Geeslin, Lamar, Mo.

WANTED—EITHER TO EMPLOY A COMPETENT lady assistant, or to dispose of a paying practice in New York. Address 240, care O. P.

GENTLEMAN OSTEOPATH. S. C. O. GRADUATE, three years' experience, having disposed of practice, desires work as assistant or to take charge of good practice for from four to six months beginning about May tenth. Best references furnished. No one without good practice and willing to pay good wages need reply. Address 241, care O. P.

PARTNER WANTED—IF YOU CAN TREAT from 10 to 12 patients a day and keep it up a Missouri osteopath has a business requiring a partner. Only those of good habits need apply, a cigaret smoker not considered. Large, strong woman might be acceptable. \$500 cash will handle this and no interest will be charged on balance—which can be paid out of the business. This is not a cheap proposition and the practice is an exceptionally high-class one. Address Missouri, care O. P.