

The Osteopathic Physician

December 1921

Vol. 40, No. 6

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The Osteopathic Physician

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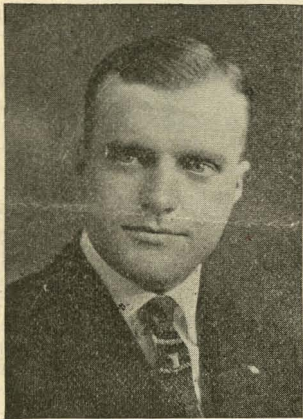
Volume XL

WAUKEGAN, ILL., DECEMBER, 1921

Number 6

Detroit Osteopathic Hospital Was Host to the 33rd Annual Meet of the Michigan Association

The month of November, in the year of our Lord, Nineteen Hundred and Twenty One, was written large upon the pages of history, insofar as the Michigan Osteopathic profession is concerned, because the greatest convention ever held by the Wolverine association took place on the second and third days of the month. The place of meeting was the magnificent new Nurse's Home, the latest unit of the Detroit Osteopathic Hospital group of buildings, erected at a cost of over \$125,000 through the generosity of Mr. Philip H. Gray.



Dr. C. J. Manby, President
M. S. O. A.

Every session of the convention was held before a capacity audience, and the speakers declared that the interest was the best possible. The convention opened at 10 A. M. on Wednesday, with an invocation by Rev. L. G. Knowles, Minister of the East Grand Blvd. Christian Church, Detroit. Dr. C. B.

Root of Greenville, Mich., President of the M. S. O. A., presided and introduced Mr. Philip H. Gray, who gave the address of welcome. We wish our space permitted the printing of his address, which was delivered with all the enthusiasm of one obsessed with a great ideal, and willing to back it up with practical effort.

If the Osteopaths of Michigan accept Mr. Gray's challenge, by adequately supporting the hospital, Detroit will unquestionably lead the world as an osteopathic center. Dream your greatest dreams for the future, osteopathic physicians, and they will be more than fulfilled, *as you do your part*. All the faith, the zeal, the practical financial aid of our benefactor, cannot bring success without your active co-operation.

Dr. Arnet J. Garlinghouse, Charlotte, Mich., responded to the address of welcome, and President C. B. Root delivered his address after the reading of the minutes. The program was of a high order and included the following speakers: Dr. Hugh W. Conklin, Battle Creek, Mich., Dr. Carl J. Johnson, Louisville, Ky., Dr. L. Von H. Gerdine, Macon, Mo., Dr. Frank J. Beal, Detroit, Mich., Dr. F. P. Millard, Toronto, Canada, Dr. H. R. Holmes, Chicago, Ill., Dr. A. M. Flack, Philadelphia, Pa., Dr. L. A. Day, Detroit, Mich., and Dr. S. V. Robuck, Chicago, Ill.

Several hours each day were devoted to Hospital Clinics, and a number of interesting cases were presented. Dr. Frank J. Beal, head

of our Orthopedic Department, demonstrated his technique, and Dr. James C. Trimby, Chief of Staff and Dr. Paul C. Goodlove, Asst. Chief of Staff, performed several major and minor operations, while Dr. George A. Ford had charge of the osteopathic clinic. It was the privilege of the hospital to furnish luncheon each day to all delegates and friends in attendance. Local Osteopaths furnished their automobiles to transport the delegates to and from their hotels. The newly elected officers for 1922 are:

President: Dr. C. J. Manby, Battle Creek, Mich.

Vice-President: Dr. J. C. Simons, Grand Rapids, Mich.

Secretary-Treasurer: Dr. E. G. Sluyter, Alma, Mich.

Statistician: Dr. G. B. F. Clarke, Detroit, Mich.

Trustees: Dr. E. A. Ward, Saginaw, Mich. Dr. C. B. Stevens, Detroit, Mich.

Delegate to National Convention: Dr. E. A. Ward, Saginaw, Mich.

Alternate Delegates: Dr. H. W. Conklin, Battle Creek, Mich., Dr. J. C. Simons, Grand Rapids, Mich.

THE JOLLY BANQUET

In the opinion of those present the annual banquet was by far the best ever held, and the attendance the largest. One hundred and six-

ty three guests were present. We can do no better than reprint what the "Highland Park Times" said of the affair:

"On Wednesday night the Osteopaths of Michigan, their wives, sweethearts and guests filled the dining hall of the Masonic Temple to capacity. The banquet was a particularly happy affair, splendid talks being delivered by all speakers on the program. Some very fine music was rendered and the assemblage was kept in continuous good humor by the versatile toastmaster, Mr. Albert E. Buss, Business Manager of the Osteopathic Hospital.

"The State Association of Osteopaths held a two-day convention in the hospital building, which was attended by delegates from all parts of Michigan.

"The principal speaker of the evening was Dr. C. Burton Stevens, President of the Detroit Association. Dr. Stevens delivered a most eloquent address and held the closest attention of his hearers from start to finish. Mayor Down responded to the toastmaster's request in his usual happy manner. Dr. C. J. Manby, of Battle Creek, spoke for the state association. Fred Dunn, legislative representative from this district, also spoke briefly, as did Dr. W. L. Quennell, Superintendent of the General Municipal Hospital, and J. Caldwell Smith, Superintendent of Buildings of Highland Park.

"A most interesting feature of the evening was the singing of Mr. Buss and his four sons, all finished musicians. They were heartily applauded and responded to many encores. Mr. Philip H. Gray, founder of the Osteopathic Hospital, and Mr. Buss rendered several duets."



New Osteopathic Nurses' Home at Detroit erected by Mr. Philip H. Gray at a cost of \$125,000

Christmas Cheer and a Blessed New Year to the Osteopathic Fold!

Palatial New Detroit Osteopathic Nurse's Home Now in Commission

We present several views of Detroit's splendid new Osteopathic Nurse's Home, built for the comfort of our present nursing staff of Detroit Osteopathic Hospital, to provide for future needs as our hospital grows. The consensus of opinion of those familiar with the construction and equipment of similar buildings is that there is nothing to compare with it in the country. It is a three-story building, with sub-basement, built of a fine grade of Dresden brick and steel, thoroughly fire proof in every

with the proposed training school. At present it is used as a recreation room, and it was here that the State Convention sessions were held. Each floor has a large airy linen room; clothes chutes and dumb waiter connect each floor with the basement. On the roof is an artistic pergola, with arrangements for spacious roof garden.

The sub-basement has elaborate four-room apartment for head janitor and wife; a sewing room, kitchenette, small laundry and trunk

No detail has been overlooked that makes for efficiency and practical comfort in the erection and furnishing of this latest unit in our fine group of hospital buildings.

This Nurse's Home is Unit No. 2 in the galaxy of osteopathic institutions which make up the vision of Mr. Gray. The total number of the dream institutions is six. Two are already here. Next!

The Jolly Old Osteopath

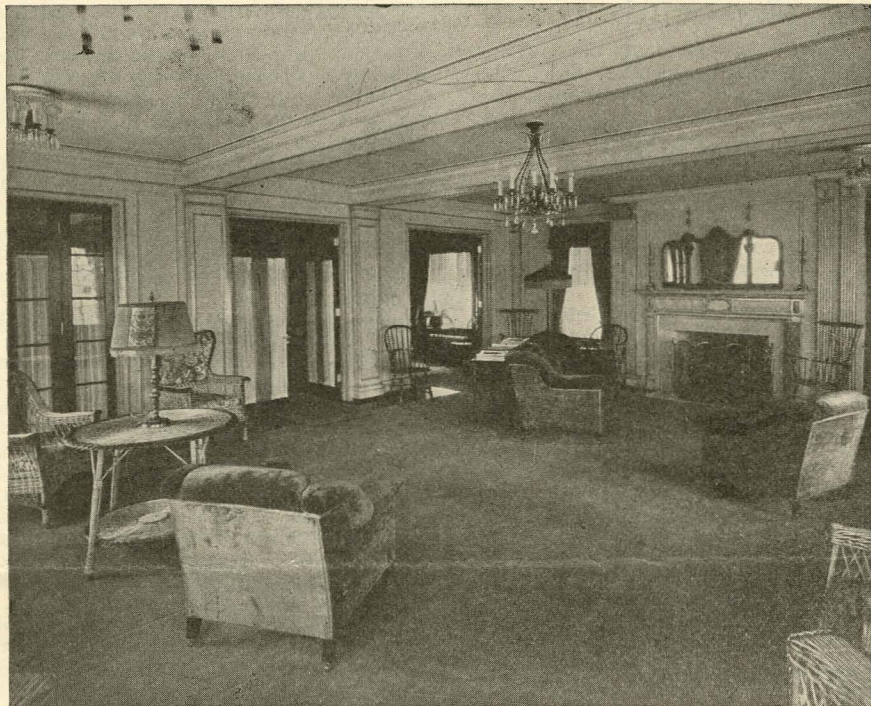
A Story from the Modern Arabian Nights

Once upon a time, dear children, there was a jolly old osteopath named Steve. The word osteopath is derived from the Latin "osteo"—meaning bone, and "path"—the road or way. Hence, an osteopath is a fellow who knows the way to all your bones. (Johnny, get off the piano.)

That's the kind of a melon Steve was. People who went to him to be osteyed, soon learned where every bone of theirs was, for Steve used to pluck them all out and show them to their astonished owners. Then he would put these bones back again in their proper places; provided he could always find these places. Otherwise he distributed them here and there impartially, hoping for the best and often having a handful of odds and ends left over which he put on ice. (Dorothy, take the fly paper away from the baby—don't you see he doesn't like the flavor?)

One day a stranger came into the office of Steve, the jolly old osteopath, "I want you to ostey me," says he. "Why," says Steve, the jolly old osteopath. "Why not," replied Alfred, for it was indeed he. Steve didn't know any answer for that one, so he said, "Park your chassis on the slab and I'll go over you." Which Alfred did. And then Steve started to go over him and under him and around him and through him and back again. He tried to dislocate Alfred's arms first, but they snapped right back into place. And then, a little bewildered, he tried to throw Alfred's legs out of joint but they snapped right back into place. Snap! Snap! Just like that. Steve looked very discouraged, but Alfred only laughed in a high cackling voice like this: "Cackle, Cackle."

"Why do your joints snap back into place," cried Steve, the jolly old osteopath. "You're the most exasperatingly discouraging patient I ever had." (Johnny, if I have to tell you again



View in the Living Room

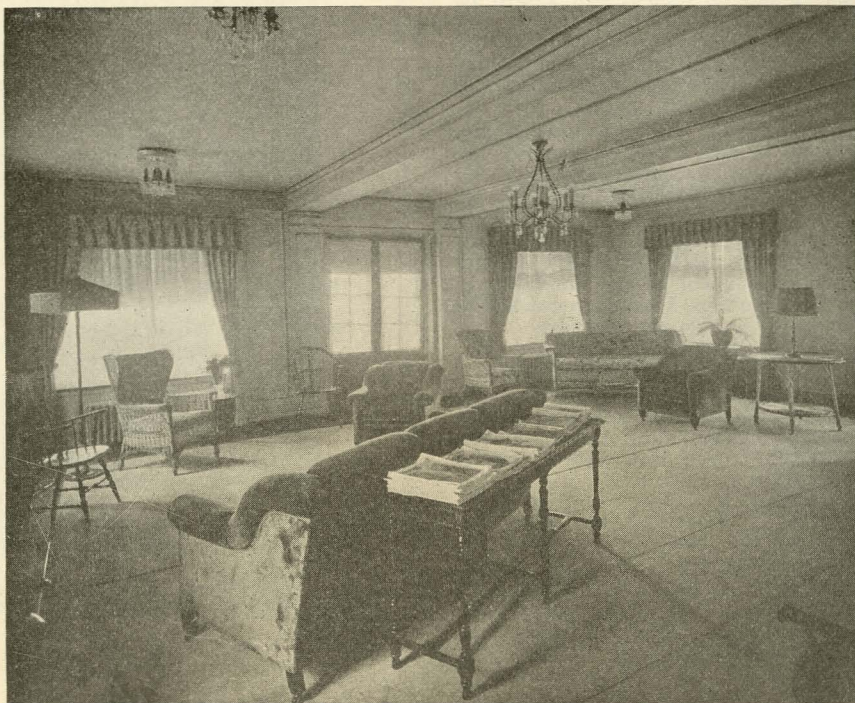
particular. The outside dimensions are 38 x 101 feet, and each floor has a full width veranda, with ornamented iron railings.

The first floor contains the spacious living room, with its beautiful furnishings as depicted elsewhere, and adjoining it and connected by French doors, are the reading and writing rooms. The color scheme is old ivory, the draperies being a dark blue velour, and taupe rugs; on the west side is a large open fire place, in which may be burned the cheer-giving logs, so indicative of the old homestead, and giving the "home-like" touch that is so often overlooked in institutional buildings. On this floor are two splendidly furnished semi-private suites, each containing two bedrooms, with connecting bath rooms; these are occupied by the superintendent of nurses, matron, housekeeper and dietician. Back of these are two small parlors, cozily furnished. To the left of the main entrance is a well appointed men's cloak room, with wash room connecting, for the use of guests.

The second floor contains twelve single bedrooms, each containing large clothes closet and furnished with hand painted bed, dresser, writing desk and cane top bench, and upholstered wicker chair. Our graduate nurses occupy these rooms, and are proud indeed of their comfortable surroundings. The wash room, tub baths and showers are of the latest type.

On the third floor are several large double bedrooms, and a living room, to be used by student nurses, which will be adequately furnished, and the same lavatory arrangements as on the second floor. At the north end is the large lecture hall, which will be used in connection

room for the nurses; and boiler room equipped with two furnaces, and every modern device necessary for the heating of a large building.



Another View in the Living Room

about getting off the piano, I'll wrap it around your neck.)

"Cackle, Cackle," laughed Alfred, "that's a good joke on you. You see . . . : . cackle cackle I'm gee, this is rich

What Is a Hospital For?

[From The Modern Hospital, September, 1921]

Recent numbers of The Modern Hospital have contained discussions between Dr. Warner of

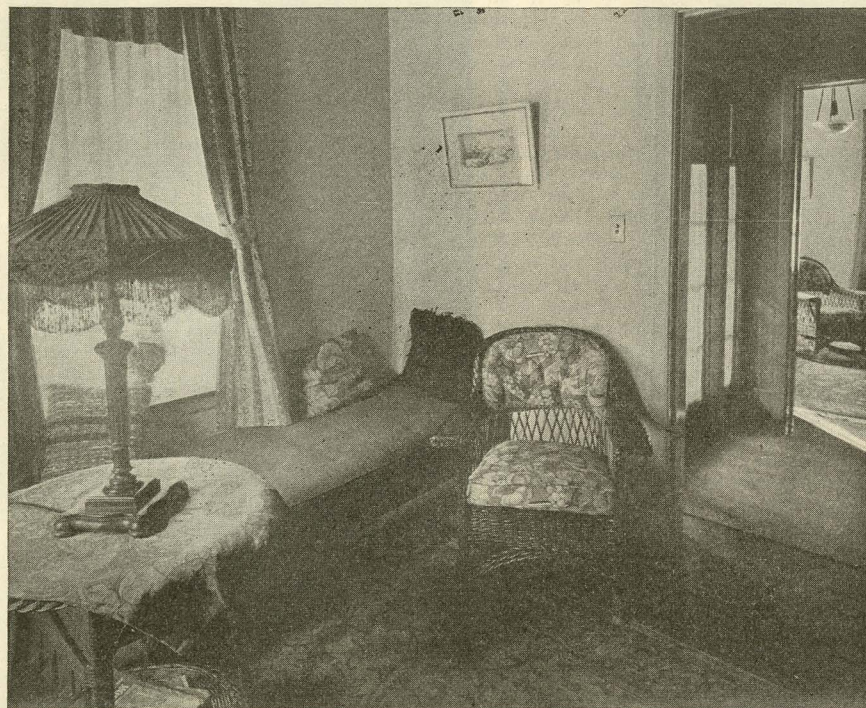


View of the Music and Dance Room'

—You can't get me out of joint because all my joints are double-jointed."

Well, sir, when Steve the jolly old osteopath heard this and realized how he had been humiliated, he took a large hammer and broke every

the American Hospital Association, and Reverend Father Straub, administrator of St. John's Hospital which is located in Springfield, Ill., and others, on the general proposition, "What is the function of a hospital?"



One of the Cozy Parlors

bone in Alfred's miserable, double-jointed carcass, including the 594 bones he had in his head.

This practically ruined Alfred, but it certainly was a good lesson for him.

And now, little darlings, gwan-to-bed, or daddy will swat you a swift one on the smilers.

(Syndicated by Associated Editors. All rights reserved.)

Father Straub took the position that the hospital should furnish the equipment, the nursing service, the food, and the material and personal comforts required in the treatment of a patient. Beyond that it should not go.

About the time this discussion was at its height, the Illinois State Association of Oste-

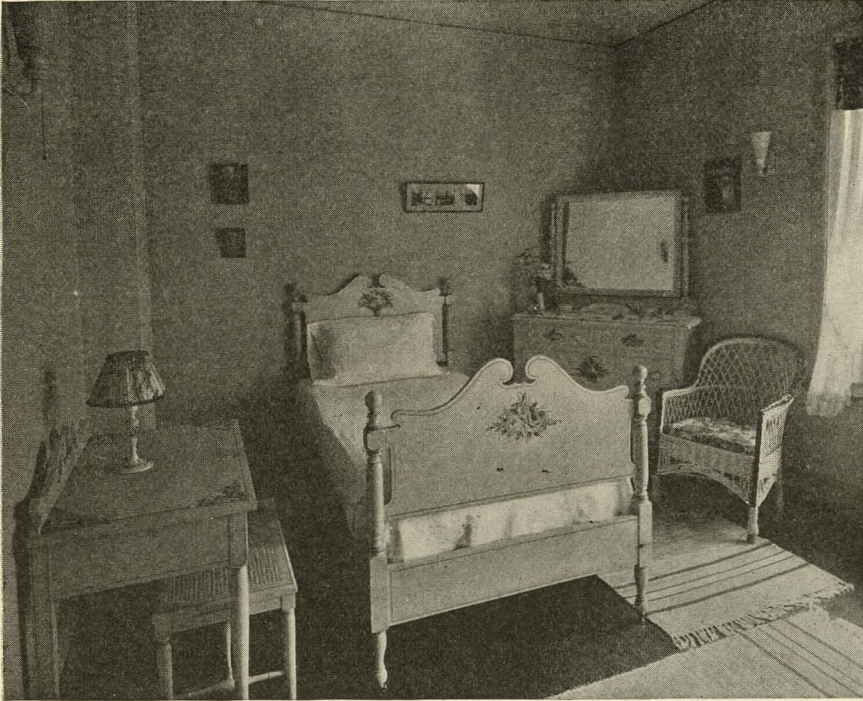
¶ Less than \$5,000 of the Allotment of Bunting Preferred Shares remains to be sold!

¶ This excellent 8 percent Preferred Cumulative Stock sells at \$100 per share and when recalled will pay a premium of 5 percent in addition to its regular annual earnings of 8 percent. Interest of 2 percent is paid quarterly.

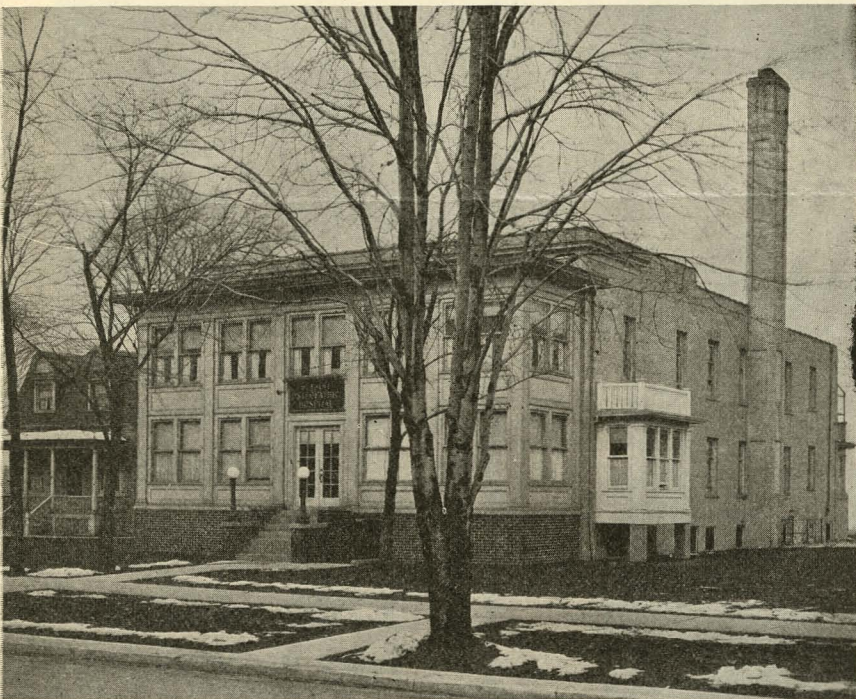
¶ Why not have a piece of this good security before it is all gone?

¶ Why not have a hand in helping to make the wheels go round in the Bunting plant?

¶ Take one share anyhow — more if you're able. That's my advice—HSB.



One of the Bed Rooms



View of the Detroit Osteopathic Hospital, the Gift of Mr. Gray to the Profession and Public

You will like that Van Brakle article which makes up January's "Osteopathic Health" entitled, "What Constitutes Osteopathic Examination and Treatment." Now, really, haven't you been waiting for this very article to use in your field in a real campaign?

Group of the Michigan State Association Delegates and Detroit Osteopathic Hospital Staff in front of the Nurses' Home



opaths held their annual convention in Springfield, the home of Father Straub and his great hospital.

The osteopaths arranged with a number of their patients for surgical and for eye, ear, nose, and throat clinics at St. John's Hospital during the convention. Operating and dispensary rooms were engaged, and the clinics were liberally advertised.

Thereupon, the leaders in the local medical society protested against the invasion of the osteopaths, and made their point so strong that the osteopaths, not desiring to embarrass the management of the hospital, withdrew as gracefully as possible.

Because local osteopaths have been per-

mitted to practice in St. John's when their patients asked for them, there has been agitation for the building of a new hospital in Springfield, which should be open only to the recognized schools in medicine.

This incident is not referred to for the purpose of debating the action of the old practitioners or of Father Straub, but simply to show that often the view expressed by Father Straub, as to the function of the hospital, is not practical. The fact that the regular schools will not practice in a hospital which admits the unrecognized is not a theory but a condition to be met when we discuss what function the general hospital should perform in the community.—*T. J. Ruddy, D.O., M.D.*

The Carberry-Feathers Controversy

Opinion of Dr. Edward B. Hart, Brooklyn, N. Y.:

MY ADVICE TO FEATHERS

My advice to Feathers is to send Bunting a check for \$62, with two thousand names for the special pamphlets to be sent out at once. Follow them up each month with the same number of "Osteopathic Health" and at the middle of each month send out "Harvest Leaflets" or some equally good literature.

Either move to more pretentious offices or improve the ones he now occupies in such a way that it will be very noticeable to the public and will present an air of progress.

Devote all his spare time writing up a corking paper on "What Osteopathy is doing for the public" or a similar subject and arrange to read it at the first Osteopathic Convention in his locality and see that it is published in his local newspapers, even if he has to give the editor a new hat!

Next summer go to one of the Osteopathic Colleges for a P. G. course and send notices to his entire mailing list stating that Dr. Feathers is going to take a six weeks course of special study during which time his office will be closed. Upon his return send another notice to the same list stating that, Dr. Feathers has resumed practice after a six weeks course of special study in Advanced Osteopathy. Then get right down to business and Deliver the Goods and walk with an air of prosperity; and above all else I would advise Feathers never to wear a collar two days in succession—in fact, change it several times each day, if necessary, but be sure never to wear a soiled or ragged collar. Never wear a soiled shirt or shiny coat; keep his trousers pressed, shoes shined, hair combed (if he has any,) *nails clean*; wash his hands between each patient; don't chew tobacco or smoke in his office.

If every Osteopath would adhere to these rules we all could say to h—— with the Chiro, and the AOA would not now be compelled to beg for publicity funds.

◎ ◎ ◎

Opinion of Mrs. E. F. Finch, Phila., Pa.:

WHAT DR. FEATHERS DID

Why he kep' on a workin'—(Feathers did) Tho the "Chiros" thot they had sht the lid. What else could he do??

For the D.O.'s, they feather the kinks, no matter what the durned "Chiro" thinks.

So Feathers works on 'til all kinks are done. Then he shoulders the laurels his workin' has won.

And feathers his nest—(this Son of a Gun!)

◎ ◎ ◎

Opinion of Dr. Eugene F. Pellette, Liberal, Kan.:

In answer to what Feathers should do in the "Feathers-Carberry Controversy" I would advise him to stick right there, and show the people that Osteopathy is far ahead of chiro-

practic. He should stay for several reasons, one being that he probably has all possessions right there, and he *owes it to Osteopathy* to put it on the map as superior to chiro. If nothing more than to hold up the principle of the thing, he should show those people.

Now first, he would have to educate the people, and he cannot do that by abusing the chiros or running them down—people wont stand for that. Teach them the *differences* in the two systems, and there is only one way to do this, and that is with the little brochure I am using and selling to Osteopaths all over North America, entitled "Some Differences between Osteopathy and Chiropractic." Some Osteopaths buy from 1500 to 2000. Enclosed find two or three of them, with prices.

[Adv. —HSB.]

He should take Dr. Reid's post graduate course at Denver, for the good it will do him individually, and the advertising he can get out of it, if he publishes it broadcast over the country.

He should work in the church, Sunday school, and in two or three good lodges and clubs, and never miss an opportunity to give a talk on some subject related to Osteopathy—mix with the people. He should use some newspaper advertising in every issue of the home paper, and send out cards and letters to each former patient offering them a year's subscription to some good osteopathic magazine, like *Osteopathic Health*, if they will mail the enclosed postal with their name thereon. This is Dr. McCole's system.

Then there should be plenty of Williams literature in his treating room to hand out to new patients as they come in; and on Xmas, he should send out greeting cards to every former patient and friend—something again along the osteopathic line. He should have a fine up-to-date office centrally located and nicely furnished.

Can't compete with the chiros? Of course he can, if he can deliver the goods—if he is a live wide-awake Osteopath, up to date, and gets results with his patients. He should be very careful of the kind of advertising he does, keep *his name* before the public, and above all keep *Osteopathy* before the public eye. Every person in the county and within a radius of 100 miles should receive my pamphlet, and then it should be printed in his town paper—that is what I did. If he has a personality that is pleasing, results will begin to come immediately.

He needs an office girl to help him *systematize* his publicity work, and she will help bring patients. Never abuse the Chiro—speak well of him or not at all. I could name lots of other ways to keep Osteopathy on the map, which I use, and he should always be thinking up new ways, and *always keep at it—never letting up, no matter how busy he gets.* One can so easily drop out again.

Opinion of Dr. Leslie S. Keys, Minneapolis:

FEATHERS' RESURRECTION

Feathers aroused from his "sleeping sickness" and caught the new vision.

He first made a list of names from the telephone book. He had the "Harvest Leaflet"—"What is Chiropractic" mailed to them. The following week they received "What Doctor Shall I Employ." Next they received "An explanation of Osteopathy,"—all "Harvest Leaflets."

By this time people began to know there was such a treatment as Osteopathy, so when "Standard Lairy Brochures" of Osteopathic Health followed they began to read them and come in for consultation.

He put "display" copy from The *OP* in the town paper and gave the Editor news items of professional doings.

As the patients came in, he impressed them with his skill by giving them a thorough examination. He gave them more literature, explaining their case, and incidentally Osteopathy, to take home.

As money came in, he contracted for "Osteopathic Health" regularly for his mailing list and kept this list revised.

He secured a meeting of the district society in his town and saw to it that there was a good pre-convention write up. It announced a free clinic during the convention where any one could have an examination. He got one of the "Ladies' Aid" societies to serve the banquet and a welcome address from the Mayor.

He took more interest in civic affairs and made his influence felt for civic betterment. His wife took part in social functions.

He talked to the Mother's Club on home treatment for common ailments and the proper selection of foods for the growing child.

He told the Men's Club of Walter Camp's "Daily Dozen" and how to keep fit.

He put Osteopathy on the map, with Feathers holding the map of Hickville, so that all who run may read and know, that Osteopathy is nature's remedy for the cure of disease.

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Dr. Wm. E. Waldo, Seattle, Wash.:

WHAT SHOULD FEATHERS DO?

It isn't necessary for him to move to another city. That would only weaken an already weakened character. If he moved he would spend ten years more of his life stewing because the people in the old home town were so unappreciative of his "ability."

In order for Feathers to "go" he must exercise his solar plexus daily; also his subconscious mind until he arrives at the "positive" state. We know how he can do this but we will not tell him without compensation, because he wouldn't do it if he didn't sacrifice. Therefore, he will mortgage his home for five hundred and send us three hundred of it. "Sacrifice to grow," as I told you before.

By now he has sold himself the idea that he is all right and that Osteopathy is necessary to the health and happiness of a great number of people. He cleans out his office, paints and redecorates and subconsciously tells those who enter his office that there is "somebody at home."

There is a small college in his town. He gets in touch with the athletic director and tells him to send the boys up when in need of repairs. No charge you know—just want to help them win for local pride's sake. Same with the High School boy and girl athletes. He doesn't go around telling the world about it. He doesn't have to. They do that; but he has commenced to feel better. Thinks well of himself, wonders why he didn't do this before—but he was always looking for the dollars—which never came.

He now prepares a list of five hundred of the best people in his town, former patients mostly, but enough new names added to make it spicy. These new names are not made up of Christian

[Continued to Page 8]

The Oscillatory-Gravity Treatment

William West, D.O., New York City

The leading men and women in Osteopathy showed so much interest in the Gravitiser at the National Convention that I feel now more strongly than ever that it is right and necessary to inform the entire profession of its many uses in the great therapeutic work we all are doing.

To me the Oscillatory-Gravity treatment is a fundamental in therapeutics. It is the only positive way in the whole field of scientific medicine by which the cerebro-spinal fluid can be used as a therapeutic or curative medium of treatment, through the methodical inhibition and methodical stimulation of the nuclei on the floor of the fourth ventricle, and the afferent centres in the cortex of the brain. While the Progressive Planing and Consecutive Oscillatory-Gravity treatment is the only proved way of disengaging and exfoliating the prolapsed bowel.

These two effects are incontrovertible: the actual therapeusis of the first; and the prophylaxis of the second. I have made over 38,000 observations and have hundreds of case records, while over three hundred machines are in daily use from my practice alone.

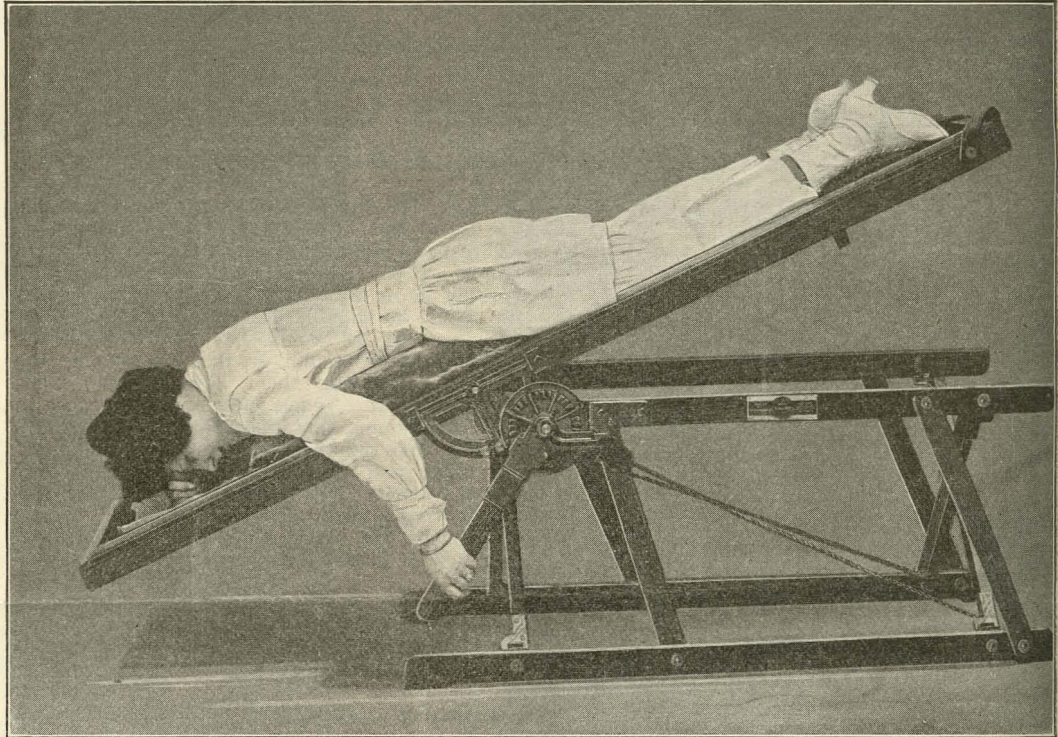
The great significance of the Oscillatory-Gravity treatment to the osteopath is that it brings under our care a vast number of new cases. In a limited space I can only indicate what these are, leaving the many other applications to be given to you later. But to show how logically and naturally they fall under osteopathic diagnosis and treatment, I may cite the tensions; the endocrines; and the various digestive and the early heart cases. Prevention of arterio-sclerosis is absolutely certain. Persons of middle life who begin to Gravitise before their blood vessels change morphologically, can be saved from arterio-sclerosis. For at this time of life the tensions set in from disorders of function which can be cured by Osteopathy and Gravitization. (All persons presenting an alternating blood pressure, either too high or too low, come under this head and can be cured.)

In the endocrine cases where the thyroid glands, the adrenals, the ovaries or the pituitary abruptly stop functioning and send the blood pressures up or down so far that death, insanity or anguish lays sinister hand on the

helpless patient, there, in this extreme emergency, the Osteopath will know exactly what to do, how to direct the patient's Gravitising, oscillating profoundly to surge the cerebro-spinal fluid against the inert pituitary, or agitating skillfully to disengage an invaginated fecal boli from an ovary, or to lift the thyroid bodily off of the tortured vagus nerve, or drag away the agglutinated segment of intestine which is crushing the life out of the adrenal glands.

Patients suffering from the cardiac neuroses

in their use of the Gravitiser, all mechanical irritations of the solar and hypogastric plexuses, the renal ganglia and the abdominal branches of the vagi are arrested; and the great powerful nuclei on the floor of the fourth ventricle, the vagi, the respiratory and the vasodilator are reclaimed from the constant inhibitions caused by excess quantities of cerebro-spinal fluid. (I am profoundly impressed with one great uniform factor in these chronic lethal maladies; and that is, that apoplexy and paralysis, and death in heart failure, start with a mechanical irritation to the sympathetic nervous system, which can be found and relieved by any Osteopath.)



Relieving Pelvic Pressure Whenever Necessary

are brought under this new osteopathic regime and restored to many activities and capacities. By being treated osteopathically and directed

Again in the digestive cases—and their name is legion, just as their malady is now all guess work as to cause or cure—the Osteopath finds the great irritable ganglias and skillfully, carefully, safely treats them so they are kept free from pressures, from agglutinated segments of intestine, from wrinkled walls of the colon, from obstructed flexures, from sagging tubes, from catarrhal sulci, from massed tissues, from retained wastes, hindered food substances, huge gas pockets and sharp zig-zag kinks, horse-shoe loops, the choked duodenum, spastic segments of jejunum, the strangled bile duct, the closed pylorus, the inflamed peritoneum, the adherent cecum, the fixed appendix and the myriad other physical abnormalities which arise in diverse complexities in the day-to-day life of the visceroptoses. Thus the reflexes are arrested at once and the sympathetics become reconstructed, so that pressures thereafter become as harmless as in child-life or in nervous immunity.

Authentic case reports (epitomized) show the following results:

Varicose ulcer penetrating through the fascia was healed without incapacitation or sloughing of tissue (photographed.)

Traumatic cellulitis was healed in four days without incapacitation.

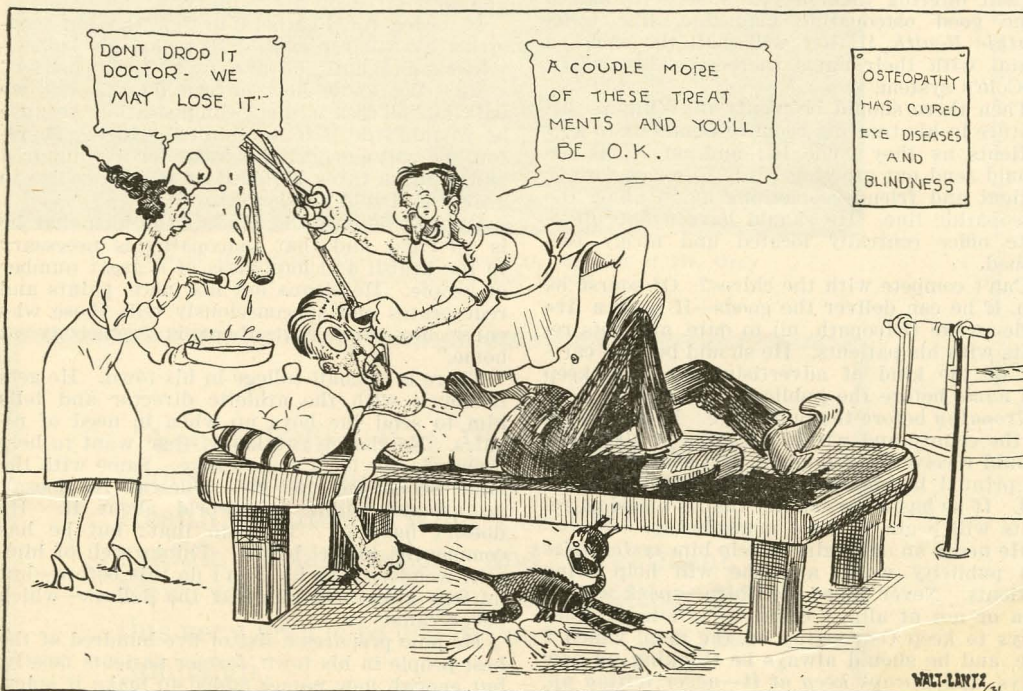
Ruptured muscle was healed in fourteen days without pain or incapacitation.

Fractured tibia was healed in twenty-eight days without pain or incapacitation.

Dropped stomach was cured, being restored to normal position and function.

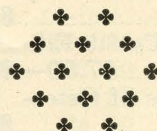
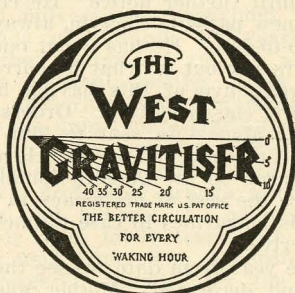
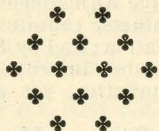
Chronic dysmenorrhea was cured.

[Continued to Page 14]



Walt Lantz, Cartoonist—Patient's Idea of Dr. Curtis H. Muncie's Eye Renovating Treatment

A New Way of Using Gravity That Gives Absolute Therapeutic Results



Brilliant results in

ENDOCRINE DISORDERS

VISCEROPTOSES

DEEP HYPEREMIAS

VARICOSE VEINS

INJURIES AND CHRONIC SWELLINGS

This new adjunctive and its specific techniques are available to every Osteopath.

Write for introductory offer for your district.

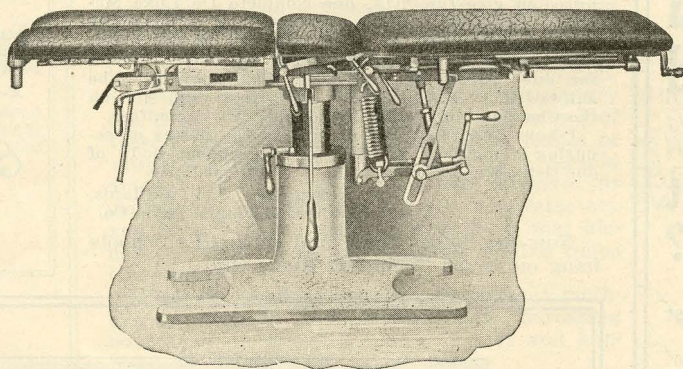
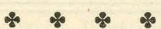
THE WEST GRAVITISER CORPORATION

75 Park Avenue, New York



Table

De Luxe



The Table They
Are All Adopting



The Table that has made the practice of Osteopathy really a pleasure. By proper usage this table will lighten your labor fifty percent.

It will make your treatments more easy to give and more effective.

Your patients will be better pleased and you will be happier.

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[Continued from Page 5]

Scientists, Medical Doctors or mental defectives but of people who think and are not prejudiced. He sends this to one of our good publishing houses with instructions to send the books monthly until further notice. He changes the names as new patients come in, always keeping his list up-to-date. He has about one-hundred-fifty dollars left out of what he borrowed. He spends twenty-five of this having his clothes put into first class condition. Orders all of the Osteopathic Magazines sent to him and kicks himself for missing out on Dr. Harry Forbe's latest research on the Cerebro-Spinal Fluid.

He keeps the rest of his money in reserve to pay for his magazines in case the new patients do not arrive.

Just one year from date we see the home repainted and decorated. Mother and children seem happier. Everybody seems glad to see him—he is glad to see everyone. He is asked to take part in community drives, to speak occasionally at the club, and is considered a substantial citizen. Verily from negative to positive is a step that can be made by those that "can" the "I Can't."

○ ○ ○

Free McManis Table for Getting Most Students

Dr. J. V. McManis shows he is a good booster, a good advertiser and a good sport by offering to give a complete up-to-date De Luxe McManis Table as a prize to the Osteopath who sends the largest number of students to osteopathic colleges next year. Fine idea! It will stimulate recruiting, beyond doubt, and this will help all the colleges. And some lucky and deserving D.O. is going to get a mighty fine prize for his energy.

Dr. McManis' offer is told in this letter:

November 18, 1921

Dr. S. L. Scothorn,
President AOA
Wilson Bldg., Dallas, Texas.

Dear Scothy:

Without strings of any sort or kind, I hereby agree to give the AOA, one complete De Luxe McManis Table with all late features and attachments to be used by them or rather given to the Osteopath who secures within the next year the most students for our Osteopathic Colleges. This table will be shipped F. O. B. Cincinnati, Ohio, upon request from the Chairman of the Student Campaign Committee.

I hope and trust that it will be the means of securing a material increase in the student body of our Osteopathic Colleges.

Very cordially,
(Signed) J. V. McManis,
Pres. McManis Table Co.

Now get busy, folks, and make the schools hang out signs "Standing Room Only."

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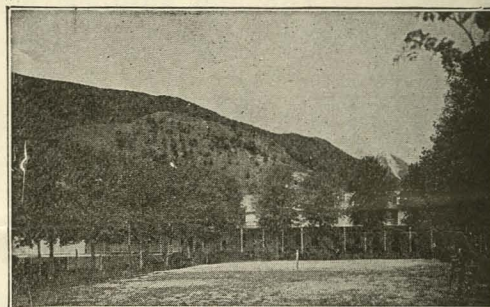
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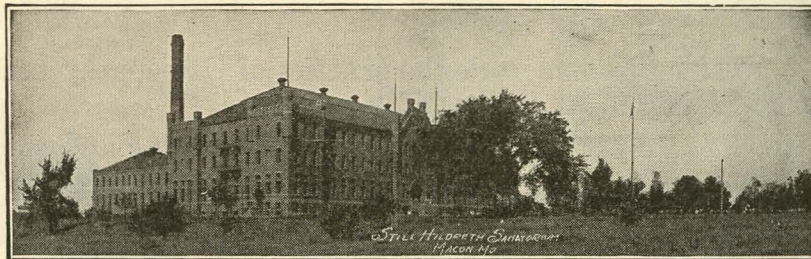
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Write for Information

Citrous Food Values

By Walton T. Farrar, Los Angeles, Calif.

The efficacy of oranges and lemons as a preventative and cure of various ailments is constantly being manifested in the exhaustive research work conducted by the various laboratories and universities throughout the world.

Thousands of children die yearly in this country, the victims of rickets and scurvy caused by deficient feeding. It is stated by eminent authorities on child welfare that it is usually the unfortunate bottle fed baby who succumbs to these maladies. They urge that the infant's diet be supplemented with fresh fruit juices, preferably orange juice.

Oranges and lemons, the principal citrous fruits, it is said, fairly teem with vitamins, activating food principles. According to C. P. Wilson, research chemist for the California Fruit Growers' Exchange, oranges contain three outstanding vitamins essential in infant's diet, one of which prevents and cures scurvy; the other prevents and cures rickets, while the third promotes growth.

Most dieticians and child specialists recommend that every child, commencing with its second month, should receive a daily quantity of orange juice, slightly diluted with water, its strength and volume to be gradually increased.

At the recent convention in Chicago of the National Society of Biological Chemists, Prof. F. J. McClendon of the University of Minnesota, made the statement that dehydrated orange juice is the ideal food for starving babies or children suffering from malnutrition. Assisted by Dr. J. P. Sedgwick, the noted child specialist, he made the experiment on twenty-five babies, ranging from six months to three years in age, who subsequently showed an increase in growth from fifty to six hundred per cent.

A careful process of concentrating orange juice will leave the vitamins practically intact at the same time greatly reducing the bulk, making it more convenient to store and increase the keeping quality.

Lemon juice as a preventative and cure for scurvy has been known for years. In fact, as far back as the sixteenth century, fishermen along the Italian coast, whose diet consisted chiefly of fish consumed quantities of lemon juice to ward off effects of the unbalanced diet.

At the beginning of the eighteenth century the British Admiralty compelled the crews of vessels bound on long voyages or to Arctic or tropical regions to partake daily of a certain amount of lime juice as a preventative for scurvy. Lime juice did not prove satisfactory and it was some time after that it was discovered that lemon juice is four or five times more effective.

With the gradual adoption of natural methods in healing, citrous fruits are increasing constantly in demand, which is met and supplied by California's golden crop.

Editor Glenn S. Moore Improves the O.O.R. & O. L. Journal

The "Journal of Osteopathic Ophthalmology, Rhinology and Oto-Laryngology," (formerly the Bulletin) came to us in new form with new impressiveness and dignity under the editorial direction of Dr. Glenn S. Moore, of Chicago. The Journal now bears a heavy gray cover and throughout, shows improvement in an editorial way, just as one might expect when a society "Bulletin" evolves into a society "Journal." Dr. C. C. Tallafiero, Jr., of Pittsburgh is assistant editor. The Journal shows that the O.O.R. & O.L. is prospering and increasing in numbers and we congratulate the editors. The achievements of this society seem to be in line with the tides of advancement that are now sweeping everything osteopathic forward.

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809 First National Bank Bldg., Oakland, Calif.

C. J. Gaddis, D.O., Editor

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SINCE THAT 'ER OST'OPATH CURED HEN PETERS OF HIS RHEUMATIZ HE SEZ HE'LL BE DANGED IF HE CAN TELL WHEN IT'S GOIN TO RAIN."



Post-Graduate Course

January 2nd to 7th, Chicago, Ill.

Treatment of Rectum and Other Orifices

Beginning with January 2nd, Dr. Franklin Patterson and Dr. S. V. Robuck will give their second Post-Graduate Course in the treatment of diseases of the rectum and other orifices. This course will emphasize office treatment for hemorrhoids and such other conditions as commonly present themselves to the general practitioner. The work will cover five hours a day for five days. The fee for this course will be \$100.00. The class will be limited to twelve, which insures personal attention. A good supply of clinics will be available so that the Doctors will have practical instruction. A matriculation fee of \$25.00 insures your enrollment, the balance of the \$100.00 to be paid at the beginning of the class. You are invited to bring or send patients. They will receive courteous attention and will be returned to their physician.

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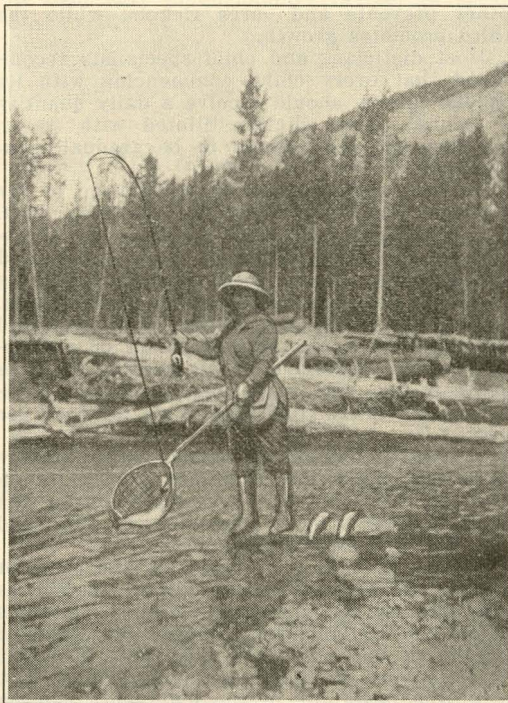
How Osteopaths Spend Their Vacations

Drs. Paul and Mary Peck Enjoy Fishing for a Change

Monarch, Colorado, Sept. 6th, 1921.

Bulletin No. 1.

Dear OP: From the enclosed kodak showing fish, you can see that Dr. Paul and myself are still up to our old tricks. We have had a wonderful summer here in these lovely Colorado mountains where it is so delightfully cool. The fishing has been fine. The enclosed pictures show the fish caught in a lake more than ten thousand feet above sea level. This lake is reached only by trail. I made it on horseback while Dr. Paul and two other fishermen friends



walked. I carried all the tackle, lunch, rain-coats etc., but it was really a wonderful trip. The fish are very hard to catch out of this lake, and it is said there are trout in there weighing as much as ten pounds. We have been here about six weeks. We leave this week for a few days in Denver and Colorado Springs and then home, reaching San Antonio about September 25th.

We were sorry to miss the AOA convention this year but could not attend it and come here too, and we both felt the need of this kind of a rest after our arduous year in practice.

With cordial greeting from us both, we remain,

Sincerely yours,
PAUL AND MARY PECK.
Per Dr. Mary.

Bulletin No. 2.

San Antonio, Texas, Oct. 25th, 1921.

Your letter received, and at your request, I will endeavor to give you a short outline of our vacation trip. We left here July 5th,

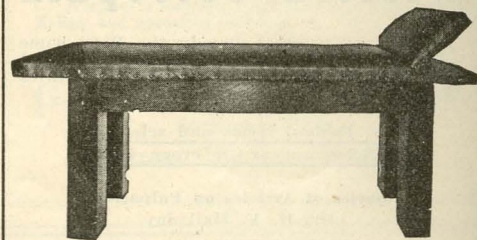
motored to Colorado Springs in four and a half days, arriving just in time for the Rocky Mountain Osteopathic Conference, which was held from July 11th to 15th. There we met many of the familiar faces we usually meet at the AOA each year, among them Drs. Hallady, Gerdine, Nettie Bolles, Josephine Pearce and others. We had a fine meeting, and of course we had a Baby Conference. I assisted Dr. Edmondson of California in the physical examination of fifty children, and found many of them perfect, which speaks well for Colorado. We all thoroughly enjoyed Dr. Hallady's lectures and demonstrations, and the osteopathic profession owe much gratitude to him for his wonderful work.

After the close of the Conference, we started for Monarch, Colo., our final resting place, where we have spent most of our vacation time for the past four summers. This place should be called "The Tired Man's Paradise." We rented a little cottage among the tall pines where the only sound at night is the roaring of the waters caused by the melting snow and ice from the Arapaho Peaks. The dead stillness of the night awakens one.

This place is on the western slope of the Continental Divide, 200 miles from Colorado Springs, and more than 8,000 feet above sea level. The air is so delicious you feel as though you could live almost without food. There are many nearby places for fishing, and one never tires of catching the beautiful mountain trout. We also get the eastern brook, rainbow and native trout, some of them as pretty as a bird with variegated colored plumage. We fished mostly in Monarch Lake, the South Fork of the Grand River, and only twice during our stay did we attempt the wonderful Strawberry Lake, which can only be reached by trail and is 10,000 feet above sea level. This is a wonderful mountain climb.

Strawberry Lake is supposed to have been a crater of a volcano, as the natives informed us they have gone as deep as 800 feet and never found bottom. This lake was stocked twelve years ago and the fish are very hard to catch, but if you are lucky and get any at all, they will be large ones. The picture shows one Rainbow Trout weighing four pounds, and two, three pounds, all beauties.

I will close by saying I wish you would kind-



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MIAMI FLORIDA, DEC. 15th, 1921 to APRIL 15th, 1922

Will pay particular attention to referred cases

Mt. Clemens practice will be conducted by Dr. M. C. Smith

1921 Holiday Clinics at Kirksville

During the Holiday Season, from December 6th to January 1st, clinics will be continued at the American School of Osteopathy. On account of the fact that the short vacation will prevent a large number of the students from going home, and in order that they need not waste any time, clinics will be continued through the week.

Any chance visitors are welcome without charge.

If you have any case you wish to refer to this clinic address

GEORGE A. STILL
A. S. O. Hospital
Kirksville, Missouri

ly send me two shares of your preferred stock in The BUNTING PUBLICATIONS, Inc., thereby helping to further osteopathic publicity, for which please find enclosed Chicago Exchange for \$200. With best wishes for continued success, I am, fraternally yours,

MARY E. PECK.

Osteopaths, Take Your Vacation in Europe

E. R. Booth, D.O., Cincinnati, Ohio

Dear OP:

Yes, I had a fine trip abroad, taking in the places of greatest interest in Scotland, England, Belgium, Switzerland, Italy and France.

It is hard to say just what was most interesting. Recent battle fields are attractive to all tourists and the older ones, such as Waterloo, are little less interesting to those who enjoy history. The ruins of ancient civilization, especially those in and near Rome, excite both wonder and admiration. Those old timers did not hesitate to act when they had an idea they wanted represented in material form.

I saw nothing more interesting in some respects than the remains of Roman aqueducts, and the ruins of the Roman Forum, the Pantheon, the Coliseum, Pompeii and Hadrian's Villa. The last named place was a city more complete in most of its appointments than any of us ever saw, built in four years.

The conditions on the battle fields of Dixmude, Ypres, Verdun, St. Mihiel, and Belleau Wood and indescribable. The valor of the English in bottling up the Huns at Zebrugge, and the vandalism of the Huns at Louvain, Rheims and other places excite commingled emotions of admiration and resentment. And the valor of our American boys at Belleau Wood, St. Mihiel, and Argonne always made me feel proud that I was a citizen of the United States.

In contrast with the desolation on every

hand, the progress being made towards pre-war conditions, especially in Belgium, was gratifying. Many agricultural sections had to be cleared of unexploded bombs and leveled where the surface was marred by thousands of shell holes before they could raise their crops. Much of that work has been done and the first crops raised this year. With all due respect to agriculture in the United States I can say that I never saw better crops of wheat, barley, rye, oats, flax, hemp (but no corn worth mentioning) than I saw nearly all the way from Edinburgh to southern Italy.

The people generally seem to be in a fairly prosperous condition. We do not have to go to Europe to find conditions that demand the

most sympathetic and intelligent consideration. We must put our own home in order and keep it that way or a like fate may await us.

The galleries of Europe with their wealth of painting, sculpture, tapestry, etc., were a constant source of pleasure. The people of 800 to 300 years ago surely had the artistic sense which, judging from the crowds in the galleries, churches, etc., they still retain.

I can certainly recommend a tour of Europe costing \$1,000 or \$2,000 or more requiring 2 to 4 months or more to all osteopaths who can go. We can learn much from Europe that will help us to appreciate our own country. And it is surely a fine way to take a rest. One grows while resting.

That Prize Back Contest

F. P. Millard, D.O., Toronto, president of National

League for the Prevention of Spinal Curvature Little did I think a few weeks ago when I wrote Dr. R. K. Smith, a P. S. in pencil across the corner of a letter suggesting the Prize Back Contest, that it would turn out to be the greatest piece of general newspaper publicity we have ever had for osteopathy. The large dailies and Sunday editions have given it good space in many cities, and, best of all, they have invariably mentioned the cardinal points that I outlined when I wrote Dr. Smith, viz., that in each instance the examination of the contestant must be made by an osteopathic physician and that his findings as to lesions must accompany two photos of the contestant, back and side view. In a few instances the papers have used their own phraseology and made puns and timely comments, but, so far, there has not been an article published that reflected other than credit upon our good work. We have enough clippings already to fill a scrap book. As nearly as we can estimate over three hundred papers and publications have mentioned the contest. One Board of Trade Journal in a western city men-

tioned the contest in a very nice manner.

Our object in carrying this contest under the auspices of the National League for the Prevention of Spinal Curvature was to get the people all over the land, First, to have their attention called to osteopaths as spinal experts and authorities on curvatures; and Second, to show that in order to have a good spine when grown we must treat the school children and have annual inspection at intervals.

We want all school children examined and this move is the best one so far to stimulate public opinion. We also wanted to show that the League, with its osteopathic significance embodied in it, is so far ahead of the workings of any Postural League or of Physical Culture methods to straighten curvatures and specific lesions that there is no comparison.

Now, that the contest is launched we want every D.O. in North America to make the most of it in his own community, and not only secure contestants but impress upon the people that a normal spine is one that has been adjusted

Laughlin Hospital and Training School for Nurses

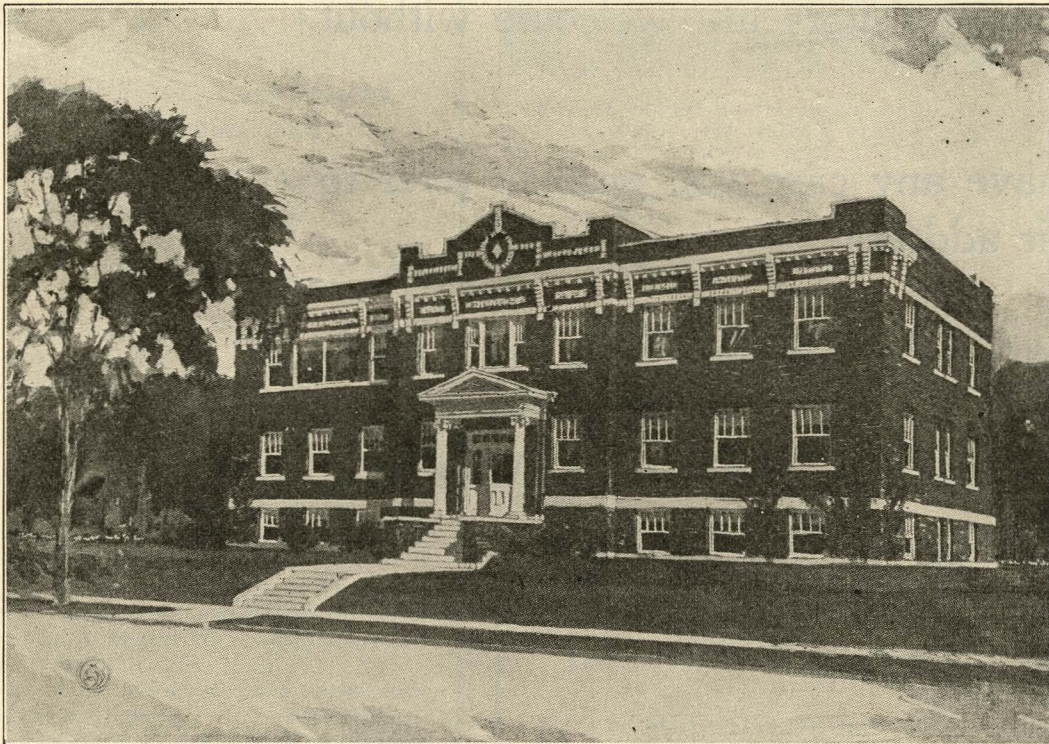
Kirksville, Missouri

HOSPITAL STAFF

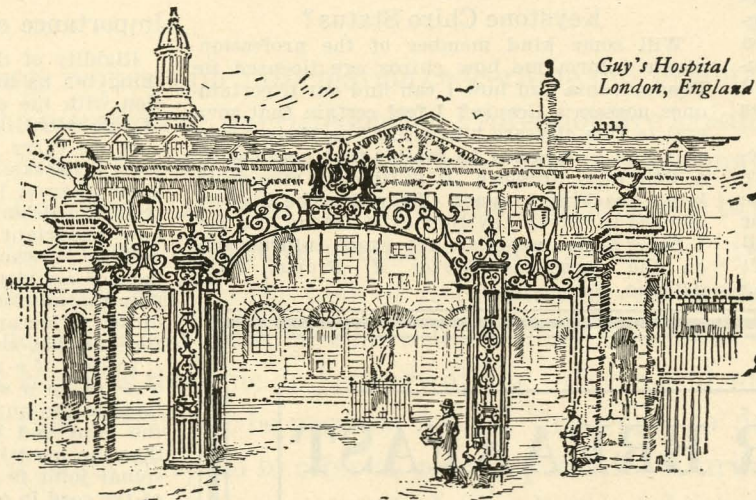
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Our hospital has enjoyed a very prosperous, satisfactory second year, with about 40 percent increase of patronage over the previous year. Dr. Hardy has proven to be very capable in the Ear, Nose, Throat and Eye Department. This institution does not claim to cure or relieve 75% of hay fever or catarrhal deafness cases; we know better: it can't be done. Dr. Earl Laughlin and Dr. Bigsby have both proved very valuable in their departments also.

For further information address Dr. George M. Laughlin, Kirksville, Mo.



The Laughlin Hospital, Kirksville, Mo.—Dedicated to Andrew Taylor Still



Sir W. Arbuthnot Lane, M.C., F.R.C.S.

Senior Surgeon, Guy's Hospital, London

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NUJOL offers advantages of suitability and purity unmatched by any other Liquid Petrolatum. It contains the finest base compounds the world provides, due to the enormous resources of its makers; its manufacture involves the use of the most modern equipment and an expert personnel, supervised by an organization of 50 years' experience in making petroleum products.

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- "In Women and Children"
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- Also sample.

Name

Address

from childhood.

It will become of greater interest as the contest goes on. All data will be recorded and tabulated, and when the time comes to announce the winners of the contest prizes, we will endeavor to show by charts and special drawings just what we mean by a "normal spine" and also show that there are no perfect spines in the world because of lesions that have registered themselves from time to time during the development period especially. Then we can suggest that to approach a normal spine condition children must be examined and adjusted at regular intervals and when grown their spines will have become as nearly normal as circumstances would allow.

We have worked out a chart for measurements that will soon be printed, and will give directions for measurements other than the lesion findings that each D.O. must make for himself. It is a tremendous task to answer all these letters and record all findings. I did not know just the magnitude of it, but am beginning

to get the vision. We are answering from ten to eighteen letters a day already and have put on an extra stenographer, as we answer all letters within twenty-four hours.

The various osteopathic publications will keep you advised as to the issuing of blanks and instructions. It has grown so fast we can hardly keep pace with the requirements for instructions and blanks.

Keystone Chiro Status?

Will some kind member of the profession please inform me how chiros are licensed in Pennsylvania and how I can find out if certain ones possess a license? I feel certain that several in this city are "thrusting" on their nerve only and I am going to inhibit that nerve with a little legal pressure. It is time we stop their lying quacking tongues. They are the biggest menace to osteopathy that exists today. So far I have been unable to get exact information on the question.—*Charles M. Brown, D.O., Altoona, Pa.*

TECHNIQUE

Advanced Technique Used on the McManis Table

J. V. McManis, D.O., Kirksville, Mo.

Importance of Rigidity of Spinal Joints

Rigidity of the spinal joints is an important thing for us to consider, especially in connection with the effects it has upon the nutrition of the spinal cord in relation to the joints.

If we carry our arm around in a sling for several weeks, the muscles atrophy and the bone marrow in the bones of the arm suffer from a deficient blood supply. This illustrates how important it is that a part has normal activity or exercise. It shows clearly that a lack of activity of the part may not only impair the nutrition of the part itself but, in addition, adjacent parts may be affected also. As for example, the bone marrow.

In case of a rigid spinal joint, the joint is, in a sense, in a sling. This rigidity of the joint impairs the nutrition to the tissues adjacent to the joint and in this particular case, we find that the most important tissue adjacent to the spinal joint is the spinal cord. The nutrition of the cord in this case is impaired in the same manner as the nutrition of the bone marrow as mentioned above.

As Osteopaths, we should keep in mind that the function of the joint is movement. That is what that particular anatomical construction is for. There are two very essential things to think about in connection with the joint and one is, whether or not the joint is capable of permitting movement and the other is, whether the joint has activity or exercise. It is not enough for a joint to be supple for it to play its part in the body economy. It must be exercised. In sedentary habits, in which the joint is not exercised, for practical purposes, in so far as it may affect body economy the joint might as well be rigid. Rigidity, to my mind, is the most important thing in connection with joints, that we have to consider.

The pathology that produces rigidity is the same that is often responsible for slight malpositions of the vertebrae. Technique that will reduce a lesion will also, to some extent, remove the rigidity. In other words, rigidity, as well as subluxations, are caused by an alteration in the structure or tone of the soft tissues, such as ligaments, cartilages, muscles, etc. The important thing to do in either or both of these conditions is to restore normal pliability to the joint.

If we are correct in our statement that rigidity is such an important condition for us to consider, as Osteopaths, we must concede the importance of its early detection. In order to detect the lesser forms of rigidity, it is necessary that the joint be relaxed as much as possible, while an attempt is made to make it describe its normal range of movement. This is best accomplished by means of the Universal Movement of the swinging leaf of the McManis Table, which carries one-half of the body through various movements, while the joint is being tested, relative to pliability.

Dr. West Oscillatory-Gravity

[Continued from Page 6]

Ulcer on the choroid coat of the eye was healed.

Incipient sclerosis of the retinal vessels (marked by failing sight) was cured in a woman of 76.

Bilateral deafness was cured by control of deep hyperemias.

Gastric ulcer was cured.

Billous headaches were cured.

Chronic synovitis was cured.

POISON FOR BREAKFAST or FORTY-EIGHT HOURS LATE

A Brief Account of the Cause and Cure of Constipation and of Autotoxemia or Self-Poisoning

Written by Dr. C. J. Muttart, Philadelphia

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THE OSTEOPATH

Williams Pub. Co.,
Publishers

Kansas City, Mo.

R. H. Williams
Editor

An Announcement

Every mail brings requests for information concerning our graduate work. These requests indicate that the members of the Osteopathic Profession are looking to the *colleges* for graduate work with which to refresh and strengthen their professional work. It is the definite purpose of the College of Osteopathic Physicians and Surgeons to meet this need by offering at an early date, strong, attractive graduate courses. At the present time, however, this institution is devoting itself to the task of re-organizing its *undergraduate work* and of moving the College to a new location where new college and clinic buildings are to be erected. This work requires the time and energy of the officers and members of the faculty to such an extent that it will not be possible for us, this year, to develop the new graduate courses which it is our purpose to offer as soon as possible. During the present year we are prepared to offer the following courses which have been established for some time and which we believe will be of interest to those members of the profession who plan to spend all or part of the next year in California.

Graduate Courses

1. Eye, Ear, Nose and Throat. A year course open to D. O's who have had two or more years of general practice. September 12th to June 10th. Tuition \$300.00.
2. General Osteopathy. Short graduate courses. January 16th to February 11th. Tuition \$50.00.
3. Obstetrics. January 16th to February 11th. Tuition \$50.00.
4. Surgical Technique. January 16th to February 11th. Tuition \$50.00. Cost of materials to be divided among members of the class.
5. Graduate summer courses. Announcements will be made later.

Undergraduate Courses

In addition to the foregoing, members of the profession are cordially invited to take advantage at any time of the undergraduate courses of the institution. Those who wish to enroll in these courses and to receive credit for the work will be charged a registration fee. There will be no charge to members of the profession who attend as "auditors."

College of Osteopathic Physicians and Surgeons

721 So. Griffin Ave., Los Angeles, California

The Osteopathic Physician

The Organ of News and Opinion for the Profession

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EDITORIAL

Fairness, Freedom, Fearlessness
"How to the line, let chips fall where they will."

Vol. XL December, 1921 No. 6

ALL AGOG FOR THAT SATURDAY EVENING POST CAMPAIGN

Every Wide Awake in the profession is on tip-toe of expectancy for the appearance of that first message of Osteopathy to come in *Saturday Evening Post* Jan. 5. We ourselves feel as enthusiastic over it as a schoolboy rooting for the home team. Won't you be proud to see your science and profession featured in a nice dignified convincing series of appeals in the pages of this splendid medium? Of course you will—particularly if you contributed \$100 along with the five hundred others—that 10 percent constituting the alert and the elect of the profession who helped put it over.

The day is not far off when every osteopath who had a hand in launching this big promotional scheme for osteopathy will be mighty proud of his connection with it.

OUR COMMENT ON "INSTANT HEAT" BOTTLES ABUSED FOR STOCK SELLING PURPOSES

We have carried in *The OP* some advertising of the Instant Heat Company of America. In our issue of last February we ran an article describing the "Instant Heat Bottle" and pointing out its possible usefulness and convenience to physicians in cases of emergency where applications of heat were desired quickly. This had reference to this particular *product* of the company only and made no reference to endorsement of purchase of stock in the company. Shortly after the publication of the article our attention was called to the fact that a reprint of it was being used by the company as an endorsement in connection with a stock selling campaign. We at once sent a representative to the concern for explanation of such action and to demand that it cease to use the article or the name of *The Osteopathic Physician* in such connection. We were assured that it had been done in error and that reprint of article would not be used further to promote stock sales.

ABUSED FOR STOCK SELLING

It has recently been reported to us that the spirit of the promise has not been fulfilled. While the reprint of article is not specifically mentioned in stock selling literature it is said to be enclosed with such literature mailed or presented to supposed prospective stock buyers and we have reason to believe that in approaching osteopathic physicians *The OP* article is used by the stock salesman of the company in such a manner as to indicate that it constitutes an endorsement by *The OP* of the enterprise as a great investment opportunity.

We emphatically deny any such endorsement. We make no prediction as to whether the Instant Heat Company of America will be a success or a failure as a money making enterprise. The outcome will depend on many fac-

tors, such as proven reliability of product; the demand created for it; the cost of manufacture compared to feasible retail selling price; the sagacity, business acumen and integrity of the managing officials *etc.*, *ETC.*, all of which we are not informed upon so as to be able to render any intelligent opinion.

On general principles we advise against purchase by osteopathic physicians of stocks in new or experimental commercial enterprises for the reason that we class them as highly speculative. As a rule the savings or surplus of an Osteopath is acquired slowly. Generally it represents the sole expectation for protection and competency in old age. It should be invested therefore, only in bonds or stocks of best assured value and safety. The interest income may be less than that promised by speculative ventures but it is better to be safe than sorry. A promise of 25% or 50% on one's money is most alluring to the imagination but such promises are seldom realized, but where such profits are possible the hazards also are always great. One may win big or one may lose the entire capital put up.

As we look at it the average Osteopath works too hard for his money to be warranted in taking speculative chances with his investments.

HAVE YOU AN AVOCATION?

We would like particularly well to have correspondence with or hear indirectly about any osteopath who has a unique avocation which would interest the rest of the profession.

Have you a fad—something in which you have arrived at proficiency or distinction?

Why not tell us about it?

On the gleaming white paper of this publication each month we have lots of room to print an interesting little story of the "Avocations of Osteopaths," even if we have to "kill" some heavier stuff to make room for it.

Dr. Dain Tasker was going to come in on this invitation for color photography talk some months back. But he hasn't—yet!

Dr. Riley Moore was going to talk anthropology. But he hasn't—yet!

Hon. Grace Stratton Airey, D.O., was going to write about politics as an avocation. But she hasn't—yet!

Dr. Ralph H. Williams was going to talk about Bucolic Joys vs. Running a Fruit Farm. But he hasn't—yet!

Dr. Harry M. Vastine was going to give the "Love Affairs of a Young Bachelor," but he hasn't—yet!

Dr. J. M. Ogle was going to recite the "Thrilling Ballad of Raising Silver Foxes" and he will—someday!

Gee! What a wonderful paper we'll give the profession when all these "500 Associate Editors of *OP*" learn to work on assignment and

turn in the editorial stuff they are commissioned to do!

Here is an official call for our "Avocation" editors to get busy—not only those hereby entreated by name but also any others who have an "avocation" out of the ordinary that has been overlooked.

What do you do for your soul's growth, your physical rest and your play beside dig at the ancient and honorable task of healing the sick and making a living? Speak up! We want to make a score or more of you famous.—*HSB.*

HO! VACATIONISTS!

If you have enjoyed some novel and unique sort of a vacation within the past year that would interest the "boys" and "girls" of osteopathy, *OP* would like to hear about it. "Too much work makes Jack a dull boy." The *OP* helps the "play" and recreation of the profession just as well as its hard work. Maybe your experience would suggest a good trip or outing to some fellow D.O. who is galled in service and worked to the bone and is just waiting for a good suggestion. What about it?—*HSB.*

Dr. West's Gravitizer Attracting Much Interest

The profession has responded warmly to my first announcement and sixty or more letters of inquiry have been received since my news of the Oscillatory-Gravity proposition went out, indicating a good deal of both scientific and practical interest in my apparatus. They seem eager to know all about it.

This Oscillatory-Gravity treatment has enormous possibilities for private schools, shops and "Y's." For under osteopathic diagnosis and direction the Gravitizer will do the work in a vast number of cases and this will be equivalent to adding "working hours" and increased income to the already hard-worked osteopath as well as floating him into a really better place in the public esteem.—*William West, D.O., 75 Park Avenue, New York City.*

"Where There Is
No Vision the People
Fail."

—Proverbs XXIX:18

Little Stories of the Clinic

C. W. Young, D. O., Grand Junction, Colo.

STORY No. 34

September 20th C. C. M. began treatment for asthma. He had been afflicted with this disease for many years and was greatly distressed with the characteristic wheeze. His ribs had remarkable mobility for an asthmatic.

Because of this affliction he was unable to attend any theater or other place of amusement. Our first treatment was given in the evening six hours after he had eaten anything. We gave the laryngeal treatment as described in the June 1919 *OP*. We secured a very copious discharge of mucus. The treatment caused him to vomit from the stomach, yellow, bitter mucus. From this first treatment he confined himself to the Webster diet for hyperacidity.

Since September 20th he has taken seven treatments, the last one ending October 26th. From the evening of the first treatment up to the time of the last, he did not have one single asthmatic wheeze. He was able to attend the theater without any distress.

COMMENT No. 1.

In view of this patient's normal rib condition we feel safe in assuming that the main cause of his asthma was the laryngeal obstruction.

COMMENT No. 2.

We believe that students of etiology will come to the conclusion that hyperacidity caused by the common diet of white bread, meat and

potatoes, tea and coffee, plays a very great role in the causation of the common diseases of mankind.

STORY No. 35

Mr. F, age seventy-five, could not hear the ticking of a watch when pressed close to his left ear. He believed he was stone deaf in this ear. He could hear a watch only an inch away from the other ear. For years he had been afflicted with laryngitis. The laryngeal treatment produced very copious discharge indeed. I could not introduce my index finger back of the soft palate into the epi-pharynx so I used my large finger and found the eustachian tubes very much indurated. Against three different points on each tube I pressed the large finger as hard as I had strength. Immediately after the first treatment he could hear the watch tick when pressed against the deaf ear. After five treatments he could hear the watch tick five inches away from the better ear and one inch from the poorer.

COMMENT

We hope all osteopaths reading these little stories will at once become proficient in this eustachian tube technic. Do not be afraid to try it out.

Compensation

By Wm. A. Settle, D.O., Peterborough, Ontario

A MINISTER'S wife. * * *
 ONCE WROTE a letter. * * *
 A LONG effusive letter. * * *
 TO AN osteopathic physi an. * * *
 A LETTER full up. * * *
 WITH GRATITUDE and friendliness. * * *
 IT TOLD how happy. * * *
 SHE WAS once more. * * *
 NOW THAT her husband's eyesight. * * *
 HAD BEEN restored. * * *
 AND THE other day. * * *
 THE OSTEOPATH was sorting * * *
 OVER SOME old letters. * * *
 AND RAN across that letter. * * *
 FROM THE minister's wife. * * *
 WHO WAS so full. * * *
 OF FRIENDSHIP and gratitude. * * *
 AND HE thought. * * *
 OF THAT poor devil. * * *
 WHO ONE day fumbled. * * *
 HIS WAY along into. * * *
 THE OSTEOPATH'S office. * * *
 HIS LAST chance. * * *
 SPECIALISTS HAVING pronounced. * * *
 HIS CASE hopeless. * * *
 AND SHOVED him along. * * *
 TO MAKE room. * * *
 FOR ANOTHER patient. * * *
 THOUGHT of his utter dejection. * * *
 UNABLE to guess. * * *
 CLOSER than five. * * *
 TO THE number of fingers. * * *
 ON THE hands the doctor. * * *
 HELD BEFORE his eyes. * * *
 THOUGHT OF his elation. * * *
 WHEN TOLD he had. * * *
 MAYBE A gambler's chance. * * *
 AND THEN of the climb. * * *

Some Patients I Have Known

III

The Lady With a Family

John Barr, D.O.

Did you ever treat vicariously? No? Stop and think a bit. I have, although I hardly ever do anymore. All of us have and hardly any of us do anymore. Vicarious treatment is a symptom of the early days, not of Osteopathy but of the Osteopath. Every Osteopath does this sort of treatment, until he wakes up. Then if the habit has not gotten hold of him, he throws it off.

The lady with a family is known to all of us. The lady is bonafide and so is the family. The lady lives in your town, comes to you for some very real ailment and brings with her the stories of the various members of her family, none of whom are living with her, however.

After she has given you a pretty good understanding of her own case, you will find that diagnostically she has the most interesting family! For instance, there is sister Laura over in St. Louis. Sister Laura has had chilblains for goodness knows how long and none of the doctors seem to do her any good. You happen to have heard of something good for chilblains and you pass it along. Sister Laura gets it in the elaborated form of a five page letter.

Then there is Uncle Jim's boy out on the Kansas prairie. He broke his arm three months ago and hasn't regained full use of it yet. Thereupon you launch into a fulsome discourse upon the merits of local massage and manipulation for the loosening up of retracted ligaments and atrophied muscles. Soon after, a six page letter carries the gist out Kansas way.

Soon after the boy has died down as a topic of conversation, you discover that the lady has another sister in Maine who is thin, run-down and has lots of backache and headache. Just to show that you know all about those cases, you build in your own mind a hypothetical case in which there is a fibroid, some ptosis and a good sprinkling of neurasthenia. You put the fibroid in after you discovered this sister to be an old maid. You deliver yourself knowingly upon the various symptoms that go into the make-up of

such a case and the different kinds of treatment that may be instituted. Unknown to you, a special delivery stamp takes it all into the Maine woods.

About two months after your first acquaintance with this lady patient of yours, you get to know the family pretty well. Some days she mentions three or four of them, recites their present conditions and receives in return sympathy—and advice. You outline a quick home method of treating colds for Will's folks who are always having colds and you point out how the hiccups can be stopped for Lottie's baby. You get so you know that family better than your own.

Some stormy day, when the patients are few and you are going over records, you come across the card of the lady with a family. A nice, steady patient, always pays the first of each month and has thirty-six treatments to her credit. Talks a good deal about her family, but you guess you can stand that.

Shortly after, Mrs. Neighbor to the Lady with a family comes in and drops the remark that Mrs. J. says you always tell her just what she wants to know about so many things and she wants to know something good for Jenny's sore throat. Well, you tell her but after she is gone, you sort of think the whole matter over. Jennie happens to be this patient's own daughter who lives at home with her and you begin to realize that you have really treated two people in the hopes of getting a fee for treating one. Along about then you wake up and the true meaning of the word vicarious floods in upon you. You've been treating the whole family and charging for but one! So the next time the lady calls and tells you all about the stroke that her brother James almost had over in Trenton, New Jersey, you keep your mouth firmly shut as you proceed to give her one of the best treatments she has ever received. Then when she is about to leave, you hand her a little engraved card with the name of a good Trenton osteopath written in and advise brother James to see him at once. You are cured of vicarious treating.

IN JUST a few months. * * *
 TO PERFECT eyesight. * * *
 AND THEN the osteopath. * * *
 READ THAT letter again. * * *
 AND BETHOUGHT him. * * *
 THAT DESPITE all that. * * *
 WEALTH of gratitude. * * *
 NEITHER THAT minister. * * *
 NOR HIS wife. * * *
 HAD EVER sent him. * * *
 A SINGLE patient. * * *
 PEOPLE ARE just like that. * * *
 YOU KNOW, sometimes. * * *
 AND THEN the osteopath. * * *

READ THAT letter again. * * *
 AND BETHOUGHT him * * *
 THAT WITH all. * * *
 THAT WEALTH of gratitude. * * *
 EVEN THOUGH at times. * * *
 THE PATHWAY had been hard. * * *
 THAT DESPITE the fact. * * *
 OF OFTEN being misunderstood. * * *
 MISREPRESENTED and maligned. * * *
 THERE WAS in his work. * * *
 YET OTHER compensations. * * *
 THAT COULD never be measured * * *
 IN THE mere terms. * * *
 OF DOLLARS and cents. * * *

"GET *the* VISION!"

Old-Timer Caught the Vision and Wrested Success Out of Failure

Some of the most interesting and profitable experiences in osteopathic practice come to our ken through personal letters that are never meant to see the light of publicity. Here is one of them—the human interest story of Dr. W. S. Maddux of Pueblo, Colorado.

Dr. Maddux had ridden slow-coach methods in practice for twenty long and profitless years. He was not a down-and-outer by any means, you understand, but just a "slow coach," as he, himself, is now frank to admit. He was only one of about 2,000 "slow coaches" in our profession who are making \$2,000 to \$3,000 a year but might just as well do a \$10,000 to \$15,000 practice. When all this vision talk was started Dr. Maddux promptly applied psycho-analysis to himself and his way of doing things and voted himself a first-class failure. He was groping toward reform and asking what to do to be saved.

Along came Evangelist Billie "Sunny" Waldo hitting the sawdust trail of the Western Circuit, preaching repentance to the slothful, new birth to the back-numbers, new methods to the twelve-for-twenty-five operators and promising new offices, a new scale of fees, financial independence, increased self-respect, growing prestige and greater usefulness in life for the osteopath who was ambitious enough to climb out of the rut and adopt advertising vision and efficiency methods in practice.

"While the light of ambition holds out to burn"—preached this pep puncher from Seattle—"the slowest practice may turn into a really inspiring and remunerative life's vocation. If your practice is not all that, the fault is with you. Get the vision!"

His words fell upon Dr. Maddux's ears just as he was looking for a friend to help him right about face and become a "live one." He believed in the new gospel of better vision, better service, better rewards, and consulted Dr. Waldo privately for advice in his personal problem. The pep evangelist gave him the best advice he had on tap and Dr. Maddux set out that very hour to realize the vision.

It was The *OP's* privilege to receive the following personal letter written about ten weeks after the Waldo-Maddux campaign started to pull Maddux up into the front row of success. It has remained a private letter until this week when Dr. Maddux generously, but with some embarrassment, consented to let us put it before The *OP* family—without, as he pointed out, really remembering what he had said in it so many months ago. We promised to pencil out anything improper for a public statement, so the error of frankness is ours if we give you the whole blunt story.

What the New Convert Wrote after Ten Weeks on the Way

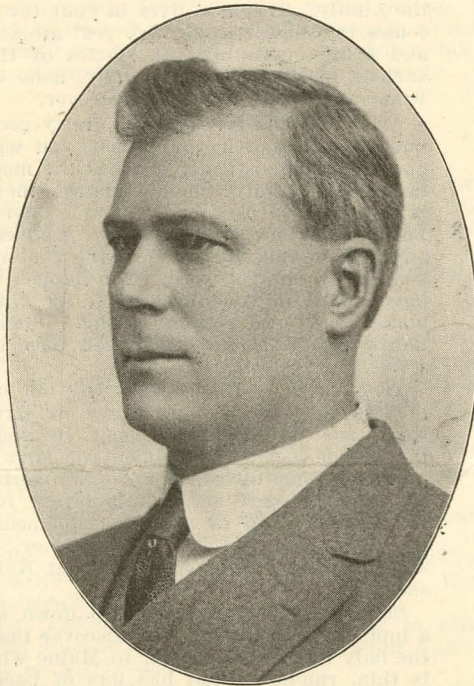
Pueblo, Colo., April 4, 1921

Dear "OP":

I want to write you a letter but am afraid I won't know when to quit. Dr. Waldo's plan for rejuvenating practice is all right. I have been going on with it as best I could since he went through here hopping the Western Circuit. I am getting more than satisfactory results with

it and for the first time in my professional experience am getting upon a satisfactory financial basis.

Fact is, I feel just like old Rip Van Winkle. The world looks altogether different since I saw Waldo and borrowed some of his method and punch. I wish I could afford to send him a check for a thousand dollars. Have been a different man since I met him. I have felt



W. S. Maddux, D.O.

in this rejuvenation somewhat like I did a long while ago when I was converted in a little old Methodist church. I just can't realize yet that I am doing so well. If I have another month soon that runs over \$500 I may go plum crazy! You know I really had come to think that I was one of these "perennial failures." But now I feel so differently. I don't have any idea that I will always "sell" myself for what I am worth, but as I get things going, get my debts unloaded, and mortgages retired, you may depend on it I am going in for the whole professional achievement. I will get better fees. Just now some of these fees look like a fortune to me.

I have not been able yet to get office rooms in the new building here that Dr. Waldo prescribed for me. All full. But I have applied. Have canned all the old calendars, cheap pictures and junk. I honestly tried to see how much I could throw away, and it did me good. I have not made the changes about the treating rooms and dressing rooms that Dr. Waldo suggested, but I have gotten a new small rug and covered a bad place in the large one with it. Old visitors wouldn't know the place now. If I do not get away from this building pretty soon I will rearrange things back here in the den. I hid all my pipes and have quit smoking in the office.

Anyhow, I booked \$482 in February, which was the largest month since November, 1918. In

April I booked \$614 which is the largest month I ever had to date and which represents what I had considered two good months' income previous to adopting the new plan of office management. Dr. Waldo assures me that I might just as well be earning twelve to fifteen hundred dollars a month as two or three hundred! Well, I seem to be starting, at least, along that new and glorious road he pointed out leading to Successville, and it surely seems like a revelation to me.

I drove away several cases by being independent but I can afford to do it. It is fine for a fellow to get that feeling.

A few days ago one of my old cases came in. She talked over her case and diagnosed it for me and said I had always done her good. (They are wealthy).

"Yes, that is true," I said, "but Mrs. Smith, the trouble has been in the past that you have quit just when you ought to have gone ahead. Now I am not taking cases any further by the pay-per-treatment plan, but solely by the case. You come in a couple of times a week for a while. I will charge you \$50 today, and if you don't come back you lose, but if you come in regularly for a couple of months it will do you good."

She didn't think she had the time and went away sorrowing—I suppose, because I would not let her take three treatments and quit again, as formerly.

It is no use to worry over the frightened ones, especially if I can keep them coming nearly as well as they are coming now.

Perhaps a little review of some of my experiences will interest you, as well as show how the Waldo technique of price-making and fee-taking works out in actual practice to the advantage of all concerned, once an osteopath gets the vision.

I tried to pull \$50 out of a well-to-do innominate case a few days ago. He had taken a lot of treatments from pseudo's and almost signed up with me, but I struck him for a fee of \$25 cash down. He did not come back.

A mother brought in her daughter who had been hit with an auto. She had been under the care of their family doctor for three weeks. He couldn't do any more for her, so they came to me. It was a "new" family. The ankle seemingly was wrenched a little, and innominate twisted. Left leg cold like a fish. I went ahead and put a splint on the ankle and reduced the innominate. The mother asked what I charged a treatment. I told her for a case like this I just charged by the case.

She had heard we "gave six for five."

"No, not here. Your bill will be \$25 if you never come back! However, I will look after the case 'till she is all right."

I saw her five times and claimed and received the fee. She was a working girl. The mother said they were well pleased, and would boost for me. She said it was exactly right to charge by the case; if I had said "so much per" that, after the second treatment, they would not have returned, as they were not well impressed with my method of treatment at the outset. If she had not come back she figures now that the girl would still be a cripple. Fine! This system helps the patient as well as osteopathy and the doctor, too.

A woman came in with T.B. history. Had indigestion, headaches and some other troubles. I figured that I could not land her for the whole value of the case, so I told her that treatment ought to do her good and she wanted to try it out. I told her that for \$50 I would see her twice a week for a couple of months. Then, if she were better, she could go ahead at a reasonable rate (\$3) until she felt that she was satisfied. She came back in a couple of days and asked how I wanted the money paid, and when I said "In advance," she said "Preposterous!" But she said her husband wanted her to try it, and she would pay \$25 down. So I said "all right; you may pay the balance in 30 days."

"Where There Is No Vision the People Fail"

She then told me if she did not feel better in 30 days she would stop. I informed her that she would not stop because I was charging her \$50 and if that was not satisfactory she could just stay at home; that I didn't want her \$25 that badly. She stayed with me and I am doing her good.

I got one case for \$150 some time back. Also had a case of chorea in for examination. Priced it at \$100 and the person never came back. It looks like a lot of my cases feel that \$50 is all they can put into treatment. But when I say \$50 it is usually a trial, and they will continue, if they improve. Of course that is problematical. Six months from now I will know more about how to handle them. But I am learning.

It is as easy for me now to say \$75 or \$100 as it used to be to ask them to take a month and pay five dollars in advance—in fact, easier, for it brings more satisfaction to doctor and patient alike. As I have said, it is better for both of us.

Very truly,
W. S. Maddux, D.O.

Six Months Later Confidence Grew With Growing Success

Pueblo, Colo., October 19, 1921

Dear "OP":

I just returned from a four day hunt for a deer which I have waiting for me out in the hills. Did not find him this time, so it leaves something to look forward to next year.

I will be glad to answer your questions with entire frankness and will authorize you to make any use of this data you chose if you really think it will help some other fellow get on the right basis. All I ask is that you absolve me from any imputation of egotism or horn-blowing. Personally, I would rather not print it, of course, but I will forget my feelings if it will do some brother or sister D.O. good to get the facts just as I have experienced them.

In all the 20 years I have practiced no other year has ever given me satisfaction equal to the closing year. Seems as if I had just gotten my focus. I had already made an inventory of myself on January 1st last. Then came along Wizard Waldo who helps the osteopath x-ray himself and adjust his lesions of management in practice conduct. My lesion, I repeat, was already partly disclosed, but I will have to go 50-50 with Dr. Waldo for assistance in getting the business machine properly diagnosed and adjusted. I could give him a greater percentage and still not hurt my own pride at all.

Looking back over the past ten months I will say that the way grows brighter every week. Of course the big Pueblo cloudburst and flood absolutely upset the machine for a time. I lost a lot of cases on account of my office being inaccessible, while those of my contemporaries were accessible. In July and August I was in the office of Dr. Ralph Walmsley for six weeks while he toured the western coast. While there I had a number of his cases and cared for them under his plan, so did not have a really good chance to work my own. And in passing I want to say it was mighty clever of the Doctor to give me his office while my own was in the clouds. By the middle of August I was so shot to pieces from heat and work that I went to the country for a couple of weeks.

My late newer line of experience has proven that most people would rather know right at the start just what you can do and what it will cost, and after you once get in the habit of talking in larger numbers it is just as easy to say "\$50" or "\$100" for a fee as it is to say "take a month or two's treatment and see how you come on."

For instance, I booked one case a couple of weeks ago for \$175 and another for \$125. These were people who were able to pay. Then on the other hand I booked one for \$35 that I should

have made pay \$75 and one for \$25 who, had she not been a working girl, would have paid me \$100. In other words, you can do charity work when it is appropriate and no one needs know about it. It is not a necessary thing in raising fees to work a hardship on those who can't pay the top price. Give them any discount they may seem to merit. Nobody can discuss your charges with you, or question your fees, when you are on this basis.

When people ask my patients what I charge a treatment they can say, "I don't know. I pay so much for the case, and that charge was fixed

when I started in." I am not bothered then by people coming in and saying that I have two prices. If any one should say that, I can say, "Certainly, I have *all prices*; and each figure is for each individual case."

For a single adjustment I get all the way from \$3 up to \$25. That is, if it is a surgical case I charge whatever the medical code calls for, even if it is \$50.

Of course I charge my old cases by the single treatment about the same as before.

After I finish up a new lump-sum case the patients are given to understand that they may

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come in for single treatments if they only need a little additional attention.

But I always reserve the right to charge what I think is fair and just.

Occasionally I make a bad guess. I took one case for \$30 for which I should have received \$75 but I stood by my agreement.

Another thing. I get rid of dead-beats. One fellow brought in his wife. I did not know him. The fee was fixed at \$100. A payment to be made the next call. He never brought her back. Later his brother-in-law told me he was a dead-beat and not to treat him unless he paid in advance. He has not been in since. My plan saved me a lot of work and disappointment as, had I not insisted on pre-payment, there would probably have been \$150 of a bad account to charge off my books for this case.

It doesn't hurt me now to miss a "sale" of my services to any caller. A man came in and wanted treatments. I looked him over and told him it would take a month or six weeks. He said he might want to leave town in two weeks. I told him I did not want his money if he couldn't give me a fair chance to fix him up.

A business man whom I had formerly treated on the pay-per-treatment plan came in. His case was estimated at \$125. He thought if he had two treatments a week for 10 weeks it ought to do. I turned down his \$60 on the ground that as a boy I had never seen my mother take a pie out of the oven when it was half-baked and leave it on the oven door to finish. He asked if the ten weeks' care would benefit him. He was advised that it would, but that he might get worse, when he stopped, and then, if some one told him about osteopathy, he would say:

"Oh, that's no good! I just paid Dr. Maddux \$60 and here I am getting worse. It helps for a while, but as soon as you quit you go down again."

I told him plainly that I was not in the half-baked business, any more. That I was done experimenting for patients. That if he couldn't take my judgment I didn't want his case. That my reputation was at stake, and I couldn't sell it for \$60. It gave him a new light, and something to think about. He must have gone away sorrowing, as he has not yet returned. Should he return his case will now be \$150 or \$175 as he will be harder to cure.

These new cases have invariably been pleased. Have said they would boost for me, and have kept their word. In talking with dentists and my friends in the medical profession they all tell me I now follow the right plan. I charged a commercial man \$5 a few months ago. He paid it and said it was worth the money, and he has been in on successive trips. If you charge a good fee you have more impetus to go to the bottom of the case. Also, people appreciate what they pay for. Fryette said it in *OP*. He's right.

I do not make 15 minute appointments any more, or give a definite hour. They come in, morning or afternoon, on certain days. I do not sell time but skill. And as for people getting fussy, they soon learn that I am the skipper of this craft. If they haven't the time to devote to getting well, I don't want them in my clinic. My cases get just the time they need and not a minute more. If it is five or twenty-five minutes, it is all the same. No patients ever get an extra punch to make them think I have earned my fee.

It doesn't make any difference about what your fellow osteopaths in the bigger cities are doing. Conduct your practice as you have the light, and you need have no fear that the other fellow will get all the cases. There are plenty to go around. You will be astonished at the number of cases that will tell you that they are mighty glad to find an osteopathic physician who has the courage to say what he can do and how much it will cost.

There are some cases of course that it is hard to decide on and the price might scare them away. Sometimes I have taken "trial cases,"

but on a safe basis. I have a case of goitre on hand now. The woman wanted to take two months treatment. I told her if she would lay down \$50 and ask for the value in work I would have to hand it back to her. She asked what I meant. I told her that \$150 was the least I would take her case for. For that amount I would see her at least twice a week for six months—may be longer. If the goitre diminished appreciably she could then go on with treatment at so much per till she was satisfied. She consulted her husband, came back and the goitre is reducing, but probably will not be cured in less than a year.

After nearly a year of experience in the newer methods of conducting osteopathic practices I am strong for the plan of charging by the case instead of by the treatment, and I recommend that this reform be adopted by the profession generally,

Fraternally,

W. S. Maddux, D.O.

CONGRATULATIONS, "OLD TIMER!"

Fine for Dr. Maddux! He is entitled to the congratulations of all his colleagues. The *OP* is proud of the privilege of telling this helpful story. Dr. Maddux's success will doubtless stimulate many another osteopath to revolutionize his methods and go after the bigger stakes.

OTHER SUCH CASES WANTED

This is just the sort of experiences that we set out to present to the profession when we opened our "Get the Vision" department about a year ago. We intend to keep this department going and would like confidences with all others who are adopting improved methods and getting results from it. There is many another helpful story like this that is slumbering in private confidences. Will you help us get in touch with one of them for the common good?

The solidity of a construction is in proportion to the amount of virtue, that is to say of sacrifices, which have been laid as its foundations.—Ernest Renan.



The Therapeutic Power of Penetrative Light and Heat in Skin Diseases has been Proven

In the Microbic skin diseases, such as acne, furunculosis, erysipelas, tinea sycosis, and similar infections, the

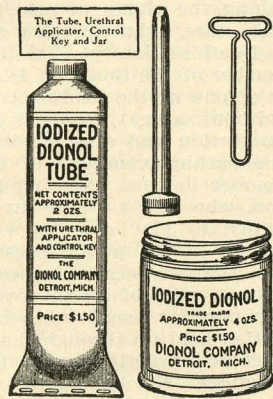
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Doctor: Have you heard of our new product for G. U. work?

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PRICES: per single tube or jar, \$1.50 each, or \$1.25 each if in half dozen lots or more. Iodized Dionol is not yet carried by your druggist. Ask him to order for you, or order and remit direct to us temporarily. Samples and literature on request.

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Is there any antiseptic more widely or generally employed in clinics, hospitals, offices, factories, schools and homes by physicians themselves, or on their recommendation, than

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Dioxogen is odorless, almost tasteless, and entirely free from acids and acetanilid. It is also colorless and does not stain the skin.

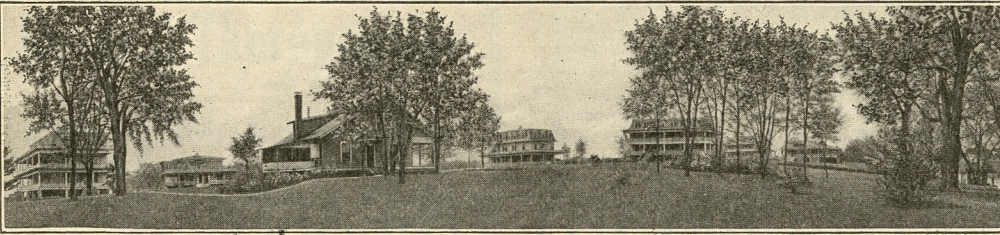
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Applied to wounds, Dioxogen promptly destroys bacteria and stimulates the reparative processes of the tissues.

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If the Profession does not support its Institutions who will?

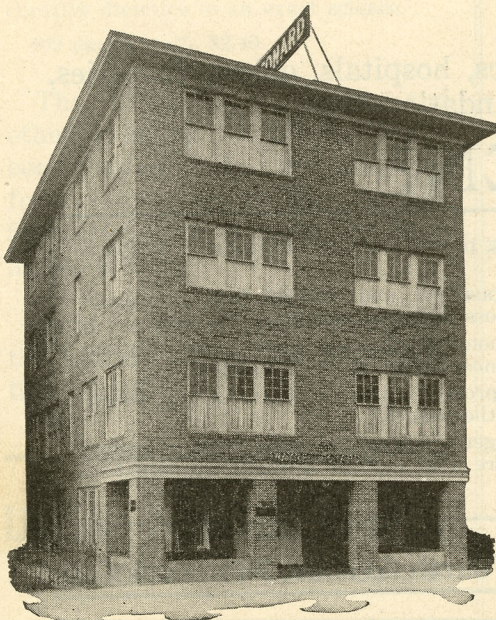
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Dear Doctor: We invite your attention to the fact that we are giving special attention to milk diet cases.

We employ the Porter Milk Diet Method exclusively.

All milk used in milk diet cases is supplied by the Walker-Gordon Company. It is a certified raw Holstein milk. There is none better.

For particulars regarding milk diet and other cases, address—

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Should the Tail Wag the Dog?

I know an osteopath who has practiced for over twenty years, who has diplomas from three well-known osteopathic schools, who has spent thousands of dollars advertising osteopathy, who has been arrested on two occasions for practicing osteopathy without a license and who has spent hundreds of dollars fighting the case in court, finally winning, thereby forever establishing the rights of osteopaths to practice in that state, who occupies an honored position in Booth's History of Osteopathy, who was a member of the Board of Directors and Treasurer of one of the leading colleges several years (without salary), who was president of the state association and also president of the board of osteopathic examiners of this state, who is a member in good standing in his state association, who took a course in chiropractic and returned to his home town and exposed chiropractic in the public press with such success that the two local chiropractors left town, but who, in spite of all this work, has had his application for membership in the national association held up through the jealousy of some of his fellow practitioners in the state in which he practices. Not having the manhood to take the matter up in the state association where such local matters should be fought out, they have carried the fight to the national association where the merits of the case are practically unknown.

In spite of the fact this application was endorsed by the president of the state association and a member of the board of examiners and two former high officials in the American Osteopathic Association (A. L. Evans and E. M. Downing), this application still hangs fire.

In these days of competition from the chiro below and M.D.'s above, can the national body afford to allow local jealousy to keep a member from doing his duty to the national association—in other words, should the tail be allowed to wag the dog?

What do you think about this proposition? Write to the Board of Directors and let them know what you think.—*J. C. Howell, D.O., Orlando, Fla.*

Sees Difficulties in the Way

In regard to the publicity being given the remarks of Dr. Woodall it would seem that the average practitioner does not fully realize the extent of the education he has received. How much time would it require for your general practitioner to explain to each and every query, that he was "a full fledged osteopath," that Dr. So and So was "just a part osteopath," and that Dr. So and So was just "a spinal adjuster?" Then would the osteopath win anything by making known the fact that the "spinal adjuster" used practically the same methods in his work as the osteopath? And how would he explain that fact satisfactorily?

My opinion of the osteopath of today and tomorrow is a man fully educated in all systems of therapeutics, with the courage and the faith to rely upon the teachings of Dr. Andrew Taylor Still for at least ninety percent of his treatment. He is a competent surgeon, a competent physician, and above everything else, he is the most highly specialized diagnostician to be found in any system.

Is the chiropractor anything but a faddist? Is he a physician? A surgeon? A diagnostician? Emphatically he is none of these. Would you imitate a system that is not founded deep enough to recognize pathology? I do not believe you would. Why would you consider imitating chiropractic when it has proven itself to be nothing more than a very highly advertised fad?

I hope that these lines may be of some service to the profession.—*H. J. Miller, D.O., Morgantown, W. Va.*

Vaudevillian Adjuncts

What is the best line of talk, while giving a treatment? Some say talk osteopathy; others, do not talk at all; some talk about the weather or other non-professional matters. A former patient called upon me last summer, and speaking of a certain D.O. said, "He is certainly the limit. It is just a scream from the time you get on the table until you get off. He has a wonderful practice." (I wonder if that was the reason he did not attend the state association meeting?) All these plans of managing practice seem to be getting results, so how are we to know what to do and what not to do? I don't believe any two people can follow exactly the same course. Some people are just as funny as a tomb stone, and others are as gloomy as Mark Twain. May be each should edge off a bit. It is necessary to diagnose the mental attitude of the patient, and adjust yourself somewhat, but be natural. Personally I do not care for the "Scream" method—too much tax on the funny bone to keep new jokes on hand, and a patient does not relax well when convulsed with laughter. However, a little of the lighter side of life will not hurt now and then, especially with patients who are inclined to see the dark side of things. But too much sociability does not stimulate specific work. And by the way, a specific treatment may take thirty minutes in some instances, or a shot gun, general treatment may be given in five minutes. The clock does not decide between specific and general treatments.—*W. C. Dawes, D.O., Bozeman, Montana.*

Treating the Patient and Treating the Disease

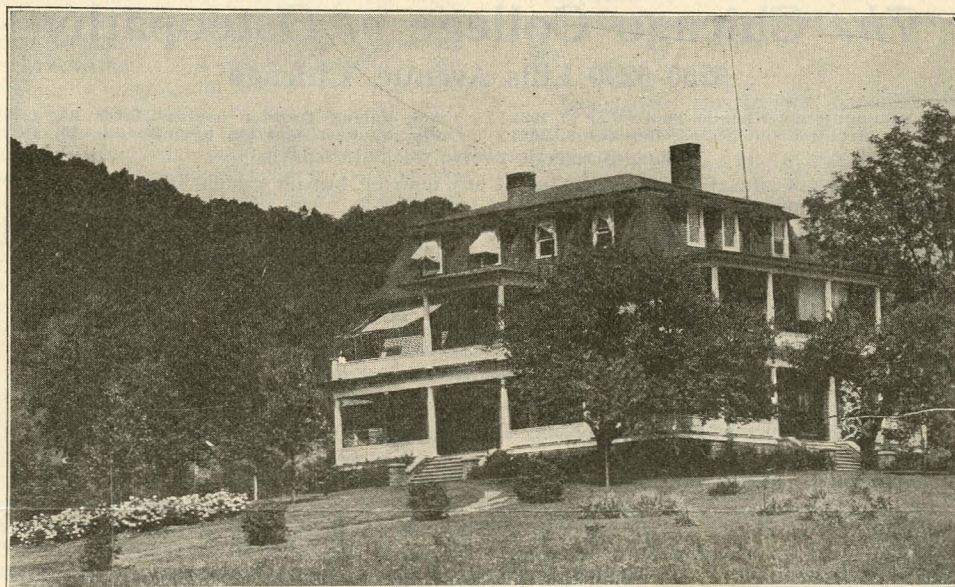
Every case of illness presents two aspects: the disease and the patient. Some physicians treat one, others treat both. There are doctors whose knowledge of therapeutics is so limited that they would fail in practice were it not for the fact that they are "good mixers," and have a strong personality which inspires the confidence of their patients. The medical doctor of this type needs only to give placebos to be successful in practice; while the osteopath thus favored may have a technique that the Old Doctor would class as "engine wiping." Whether they are conscious of it or not, what these doctors do is to treat the patient.

In some cases treatment of either the patient or the disease is all that is necessary; but more often consideration of both factors is essential to the best results. There is, for example, the type of patient who can be given instructions regarding diet or exercise or hygienic measures, and who will carry them out regardless of whether the rationale is explained to him or not. On the other hand, there is the patient with the inquiring or analytical mind who will do little to help in his treatment unless he understands all the whys and wherefores but if this condition is met, and he is given a logical reason for everything he is instructed to do, this type of patient will co-operate with the physician far more intelligently and more effectively than the one who does not understand the reasons for what he is asked to do, and does not

care.—"Team Work," *the Bulletin of Los Angeles Osteopathic Society.*

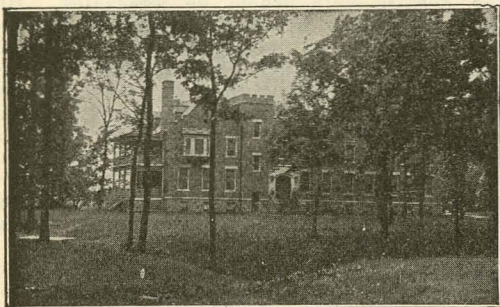
Know Your Specialists

All physicians doing a general practice have need often to call for consultation or to refer cases to some specialist for diagnosis, treatment, advice or prognosis. Do you call an osteopathic consultant? Do you refer your cases to an osteopathic specialist? Do you know from actual knowledge the kind of work that specialist is doing? Have you seen your surgeon work? Do you know from actual observation that your throat specialist leaves a clean fossa in tonsillectomy? Is your gastro-intestinal specialist a real scientist? Can you depend upon the prognosis of your blood specialist? We have some excellent osteopathic specialists—men and women who are doing superior work. Let us seek them out, become acquainted with them personally, investigate their work, then we'll support them confidently and enthusiastically.—*Anna G. Tinkham, D.O., Waltham, Mass.*



ASHEVILLE OSTEOPATHIC SANATORIUM Asheville, N. C.

An institution where Osteopathy, Rest and Milk Diet—the triangle of health—are scientifically administered and controlled.—*Elizabeth E. Smith, D.O.*



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Emphasizes *Diagnosis*, believing that a condition accurately diagnosed is half cured. All modern facilities for diagnosis, as well as treatment, are found in our equipment. Our institution has been inspected and endorsed by many of the best men in our profession.
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The Efficient Osteopath

Dr. C. C. Reid, Denver, Colo.

VIII

Expenses Not Usually Considered

(Continued)

PERSONALITY

To know a great many osteopathic physicians over the country and to be known in return by

so many professional brethren, it is a little embarrassing to discuss this particular subject. The subject enters into people's psychology and dispositions in such a way that some who are following the reading of these particular articles on Efficiency might possibly think that I had in mind some of their qualities for criticism. This is absolutely not the case, as this part of the work is written entirely impersonally, and has no reference to any particular one.

The Chicago College of Osteopathy

5200-5250 Ellis Avenue, Chicago

The Autumn Quarter begins September 23, 1921
The Winter Quarter begins January 3, 1922

The Spring Quarter begins March 25, 1922
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Each quarter is twelve weeks in length.

Students are admitted at the opening of any quarter, but no student is admitted after the first week of any quarter.

This College is registered with the New York State Board of Regents. This means that it maintains the high standard required by that Board. It also means that graduates of this College are admitted to the examination for license to practice in New York State and all other states which maintain the New York standard.

Students who wish to be qualified to practice in New York State should be careful to select a College which is registered with the New York Board of Regents.

For the right kind of a course in Osteopathy extensive clinical facilities are needed.

The clinical opportunities of Chicago are unsurpassed.

No prospective student of Osteopathy should overlook the importance of these clinical opportunities.

The College maintains an excellent Osteopathic Hospital.

In the Training School for Nurses there is room for a few more candidates. The Training School course is two years in length. At least one year high school work, or its equivalent, is required for admission. Tuition is free and, after the probationary period of three months, student nurses are paid \$20.00 per month during the first year and \$25.00 per month during the second year. The student nurses receive board, room and laundry free, and two weeks' vacation each year.

For further information, address:

The DEAN

258% GAIN

KANSAS CITY COLLEGE of OSTEOPATHY and SURGERY

had the above student gain for 1920-1921.
Nearly tripled its enrollment and now starting
for a more remarkable record for 1921-1922.

It's "The Aggressive College"

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Kansas City, Missouri

It is merely a study of this phase of our virtues and faults with a view to arousing thought and desire for betterment.

The lack of a wholesome personality is so glaring in so many of us that any reader of human nature cannot fail to be impressed with some of our shortcomings at a glance. The critical and informed person in the study of human nature will analyze any lack of sincerity in spite of the fact that we might try to cover it up, especially if he has a chance to be with us for a short time and hear our conversation.

Personality is so fundamentally back of all our habits and other traits that it is perhaps more necessary for a careful study and more essential for the following of definite plans to increase our personal power and get rid of all faults that tend to depreciate people's good opinion in regard to us. A good personality even for the sake of getting the most out of life is worthy of our best efforts in its cultivation, but if we seek money in life, or power, or influence, a good and pleasing personality will contribute much toward these ends.

I repeat again here for the sake of emphasis in the consideration of the subject "Expenses Not Usually Considered," that a lack of the cultivation of a wholesome personality is probably costing us the most from actual deficiency along this line than from any other of the subjects yet discussed or to be discussed.

Some of our leading osteopaths who have studied long and hard, and who can make a good speech, are so atrophied socially that they are of no consequence outside of a strictly professional gathering. I know of highly scientific medical men as well as osteopathic physicians, who can hardly hold an intelligent conversation and be level headed and reasonably well informed unless it is some professional topic. I can only mention some of the most glaring deficiencies in our personality here. There are lots of psychological books that will give analysis of the many details from the mental standpoint. It is my desire here to mention a few of the things that everybody should try to conquer in their personality even tho they might disagree on many minor details.

First. Hypercritical toward patients and doctors. I do not mean by this that one should close his mind to all defects in his patients or the doctors with whom he associates. He should remember, however, that we are all mortal, that we are all finite, that we are all prone to err, that we all have our weaknesses and imperfections. Realizing this, we should not be severe in our judgment toward people's faults, especially those of our patients. One patient's money is just as good as another when you count it in dollars and cents and it will contribute to the paying of rent, keeping up the current expenses, running your home, buying libraries, attending conventions, etc.

Every patient, unless he is out of his mind, desires to get well. He has hopes and ambitions to realize, and duties to perform. If he is sick, he is in a state of mind that should awaken our sympathies and a desire to serve him in a patient way rather than awaken criticism in our minds. Any criticism that comes uppermost in our minds concerning a patient should be carefully examined before any expression is given to it. In that case, one who thinks it over honestly and sympathetically will very likely have little to criticize. Any doctor who criticizes patients to his own help around him, to other doctors or to anyone, is gradually building a solid wall between him and any permanent friendship or patronage based on right relation between himself and that individual. The patient will necessarily gravitate away from him even if he never analyzes exactly what the inharmonious relation might be.

This is expensive for the doctor not only for the loss of that patient, but for the influence

[Continued to Page 29]

"Where There Is No Vision the People Fail"

Low Table Technique

Dr. Still's Technic Applied Practically

Earl Willard, D.O.

IV

Before undertaking the standardization of Doctor Still's technical methods, which we shall do in the ensuing article, let us inquire as to the mechanical principles he employed. For I wish to make clear that I am claiming to classify merely those contacts where direct leverage with speed is employed; and only those methods where the weight of the physician's body does the work. In one form of direct leverage the weight of the patient's body makes the adjustment.

Dr. Still employed both of the foregoing forms of direct leverage adjustment, and he also employed other methods of adjustment as well. These various methods, which the Father of our profession used when indicated, may be grouped under the following heads:

In addition to—(1) Direct Leverage with Speed he employed, (2) Direct Leverage with Steady Pressure, (3) Direct Leverage with Sudden Separation, (4) Indirect Leverage with Steady Pressure or Steady Pull and (5) Indirect Leverage with Sudden Separation.

There are methods in vogue today that perhaps some would object to classifying as above. The classification, however, serves to illustrate my point, and the names themselves are sufficiently descriptive to need no defining. Every osteopath knows that when the adjusting hand is placed directly upon a lesioned vertebra, the bony eminence with which contact is made acts as a lever for moving the vertebra or rib.

My purpose in the present article is to describe the bony eminences on the physician's hand used for direct contact adjustment. And in subsequent articles I shall describe the points on the patient's back where the various bones of the hand and wrist are placed. Also I shall select one contact from each of the general divisions offered in my classification last month, and describe step by step the events coincident with adjustment.

CHRONOLOGICAL EVENTS IN ADJUSTMENT

Each contact to be described is clearly defined; its synonyms and use are given; after which the technical events in every adjustment are given as follows:

1. Position of Patient
2. Position of Physician
3. Placing Distal Hand, (The hand away from the patient's head as the physician faces across the table.)
4. Placing Proximal Hand, (The hand near the patient's head.)
5. Shifting Patient's Body
6. Final Preparations
7. Moving the Vertebra

CONTACT POINTS ON ADJUSTER'S HAND

The bones of the hand and wrist most frequently employed in making direct contact—and Dr. Still in wonderfully expert way made adjustments with first one and then another part of the hand, according to spinal indications—are as follows:

1. The Pisiform bone
2. The Scaphoid bone
3. The Semilunar and the Os Magnum
4. The First Metacarpal bone
5. The Fifth Metacarpal bone
6. The Multangular bones

These bones may be readily located in the following fashion: With the hand held palm upward, or supine, the bone corresponding to the inner or ulnar edge of the hand proper, lying between the little finger and the wrist, is the fifth metacarpal bone.

In line with this bone, but nearer the forearm, at the extreme inner, palmar aspect of the wrist, the prominent, marble shaped projection of the small pisiform bone is felt.

Straight across the wrist about an inch or more toward the thumb or radial side, a deep depression intervening, another eminence—more irregular in outline, larger and less readily delimited—is felt. When the thumb and thenar eminence are moved, this bony prominence—the scaphoid—remains stationary.

Lying at the hindermost part of the palm, at the bottom of the depression between the two above named eminences, is the semilunar bone. Immediately distalward of the semilunar, running lengthwise of the hand, in the cleft of the wrist formed when the thumb and little fingertip meet, the os magnum lies.

The first metacarpal, or thumb metacarpal bone, is that part of the hand proper that moves with the thumb independently of the remainder of the hand. The fleshy pad on the palmar surface of this bone is called the thenar eminence. Across the palm from it is the hypothenar eminence.

The trapezium-trapezoid, or multangular bones, lie distalward toward the middle of the palm from the radial end of the freely movable first metacarpal bone.

With these anatomical facts, and the simplified method suggested in the ensuing article for locating vertebral lesions, the reader will have a thoroughly practical basis for study in the science of making direct leverage contact correctly. And in closing let me impress upon the reader that any of the forty or more contacts named in my preceding article adapt themselves equally well to bedside and office practice.

(To be continued)

Special Information for Osteopaths

Under the laws of some States osteopaths are prohibited from using anything of a drug nature.

Dionol and Emulsified Dionol have no drug contents whatever and hence do not come under these restrictions. Their action is in strict consonance with osteopathic principles, being entirely mechanical, hence no drug re-actions are possible.

Osteopaths, throughout America, are using large quantities of these preparations, and there has never been a legal exception taken to their use, excepting in one case, and when the authorities learned the above facts the case went by default and they never even appeared against the doctor in question.

Dionol treatment is the only remedial agent that we are aware of that acts strictly in a mechanical sense and without drug reaction and which may be safely employed, internally or externally by drugless physicians generally.—The Dionol Co., Garfield Bldg., Detroit, Mich.

Poliomyelitis

(Infantile Paralysis)

By F. P. Millard, D.O., Toronto, a remarkable book on account of the clearness and comprehensiveness of its treatment of the anatomical, physiological and pathological phases of the subject.

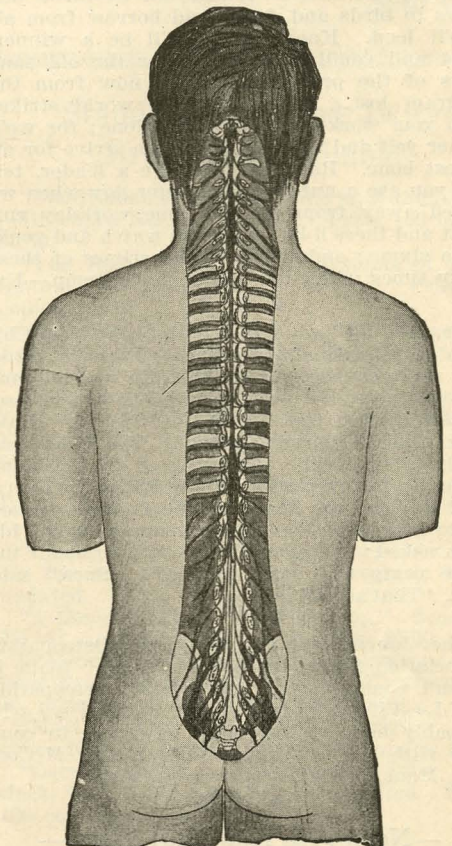
The book has 162 pages, printed on high grade stock; 97 illustrations; bound in cloth, stamped in gold. No osteopath should be without a copy.

Only a limited supply of copies available. You will need two copies, one for your reference library, one to circulate among your patients. Order now.

Price—\$4.00 Postpaid

The Bunting Publications, Inc.

Waukegan, Illinois



The spinal cord and nerves in situ. This illustration is typical of the unique and artistic anatomical drawings of Dr. Millard as displayed in this book.

Humanizing the Bunch

Seattle Osteopathic BULL-e-TIN

December, 1921

Published and Edited:

W. E. WALDO, Josh Green Bldg.

No Subscription received and none Deceived.

—, Texas.
Dear W. E. W.:

I just received the BULL-e-TIN and it is some baby BULL-e-TIN, I must say. I took it with me as I went to lunch and my beans got plum cold for I forgot when I commenced reading it that I had ordered my lunch, until the waiter asked me if there was anything wrong with my dinner that I didn't eat it. Then I started for the office and stopped on the corner for I couldn't leave it alone and I laughed out loud two or three times and people turned and looked at me wondering what was the trouble. I hope you keep it up for it is the only publication in existence in our profession that gives you a laugh instead of a pain.

Signed—Name on request.

—Crazy Times—

Strike and the world strikes with you, work and you work alone; our souls are ablaze with a bolshevik craze, the wildest that ever was known. Groan and there'll be a chorus, smile and you make no hit; for we've grown long hair and we preach despair and show you a daily fit. Spend and the gang will cheer you, save and you have no friend; for we throw our bucks to birds and ducks and borrow from all who'll lend. Knock and you'll be a winner, boost and you'll be a frost; for the old sane ways of the pre-war days are now from the program lost. Strike and the world strikes with you, work and you work alone; for we'd rather yell and all raise hell than strive for an honest bone. Rant and you are a leader, toil and you are a nut; 'twas a bitter day when we pulled away from the old time workday rut. Wait and there'll be a blow up, watch and you'll see a slump; and the fads and crimes of these crazy times will go to the nation's dump.—Ex.

Dr. Geo. Still wanted to go by boat from Chicago to Cleveland. He found that he could just make connections if the train was on time into Chicago. As usual the train began to lose. In desperation Geo. wired the SS Co.—“Hold boat. Large party coming.” The boat was ready to sail. The officers paced the deck impatiently for over an hour wrathful at the delay. Geo. boarded the boat and the Captain rushed up to him and, shoving the telegram under his nose, asked: “Do you know anything about the large party that was coming?” “Sure,” said Geo., “That's me.”

The Journal of the American Osteopathic Association for September is at hand. While it doesn't compare with the Seattle Osteopathic BULL-e-TIN, still in its new make-up we will probably have to buy some new type to compete with it. Congratulations, Editor McConnell, Manager Chiles and everybody.

—Noble! Is This Your Town—

The Deputy dropped into town and started to get acquainted. The man who looked like he could tell more about everybody and everything than anybody else in town was first ap-

proached. He was an old-timer with gently flowing lace curtains.

“How does it come,” asked the deputy, “that your town shows a decrease in population?”

“Dunno,” answered the local character.

“Too many deaths?” suggested the deputy.

“Not 'nough.”

“Then perhaps there are not enough births?”

“Too many.”

“I don't get you. If there are only a few deaths and many births, the town ought to increase in population.”

“It's just this way. Every time there is a birth here, three or four people leave town.”

—Seattle Shrine Bulletin.

Dr. E. R. Larter of N. F., N. Y. lives near lots of water but he never falls for it.

What we need is more appreciation and less depreciation.

We need loyalty to our National Association like that shown by Dr. A. L. Evans of Miami, Florida. Things haven't always gone as he would like to have them and no doubt, at times he has felt hurt at the turn of things but does he stay home and pout or shout about it? He does not. He comes regularly to the Conventions and serves in any capacity requested and helps and everything, hence this note of appreciation.

Dr. C. C. Reid of Denver may be President of the Lions but he is also a Bear at taking out tonsils and everything.

We understand that a celebrated New York City osteopath and gadabout at the Society Capitals of Europe has just refused appointment by a certain King as Court Osteopath to Christiana. Couldn't afford to give up his lucrative Manhattan practice. Name withheld out of consideration to the Court thus rebuffed. Geo. would rather be a doorkeeper in the House of Delegates sometime may be, than have to laugh out of politeness at the Swede jokes of a Court Jester.

—The Worth of Jimmy's Smile—

Little Jimmy Godfrey, aged 13, climbed a tree—out in Kansas City—to gather walnuts. He came in contact with an electric wire. One side of his face was burned, leaving an ugly scar. A damage suit against the power and light company was instituted on Jimmy's behalf. On the witness stand, Jimmy was asked to try to smile. The only result was a puckering of the lips and a melancholy drawing of the face. A physician testified that the smile muscle in his cheek had been bound by the scarred tissue above. The jury promptly returned a verdict giving Jimmy \$20,000. That becomes the officially fixed value of a smile. Moral: If a smile is worth \$20,000 when you lose it, it is worth \$20,000 when you use it. The world is full of Jimmy Godfreys—some of 'em little chaps like him, some of 'em big, grown-up folks. Some of 'em are like Jimmy is now—“smile muscle” always gone—instead, a deep, dark, foreboding frown that makes the world a little darker and a little gloomier for all who come in contact with them. They paid Jimmy \$20,000 to compensate him for his loss. His loss! Do you get that? In other words, important as Jimmy's smile was to others, it was most important of all to him.

—from Grand Rapids Herald.

Too many in our profession incline towards living in the past. That accounts for the prevailing idea that the colleges do not teach Osteopathy as they once did. It also accounts for some of the articles criticising the AOA and its policies.

You must talk Osteopathy “up” and not “down.”

Read Dr. Platt's article “The Pelvic Girde” in September Journal AOA.

It matters not so much the individual; but the principle—that's what counts.

***** Dear Ex. Pres.:—
* I challenged you to
* Golf at Chi. and you said
* you had just been elected
* Pres. and it wouldn't be
* dignified. At Cleveland
* you said you were too
* busy. What will be the
* excuse at Los Angeles?
* Fraternally,
* Hugh Conklin.

* Dear Hugh:
* I'll be in the hands of
* my Physician, Ed. Merrill
* at Los Angeles. Of
* course wife and boys will be along and I'll be
* nervous and everything.

Editor—BULL-e-TIN

Acceptance of the Editorial Challenge

To whom it may concern:

The writer gracefully acquiesces in that it would be quite proper for him to continue the quaint and unique custom initiated by past President Waldo in staging an elaborate and sumptuous spread to the editors of the profession. The same feast of reason and flow of soul to take place at the next annual Convention of the American Osteopathic Association at Los Angeles. However, the writer reserves the privilege of naming the time and place and it is quite probable that it will be elsewhere than at the Hotel Ambassador—possibly at “T-bone Reiley's” or the “Dirty Spoon.” But, that is another story, as Kipling would say, and we will not dwell upon that now. Suffice it to say the banquet will be consummated with great eclat; however, the Scribes and Pharisees that participate in this regal collation will be confined to Major Leaguers. Since the advent of the Bull-e-Tin fathered by Waldo, there seems to be a disposition on the part of quite a number of bushers to break into the journalistic field. It has been rumored that Hildreth, Swope and Conklin have employed Attorney Atzen to negotiate with William Jennings Bryan in the hope of turning “The Commoner” into an osteopathic publication. But that is not the worst of it, for it is feared that Gilmour, Marshall and Christenson may come to the conclusion that the osteopathic profession should have a Fountain Head and undoubtedly they would want it to be in Iowa.

Of course I impugn no man's motives but I am frank in confessing that I view these activities with suspicion. While I would not insinuate that their sole and only motive is admission to the “Seats of the Mighty,” yet I have no hesitancy in saying that I ha'e me doots. However, I will give this matter deep thought and it may be possible to include these bushers at the second table where they can frolic and their antics will not disturb their elders. I am inclined to think that these Scribes of the Major and Minor Leagues should have a censor committee the same as paid advertising, so that they can be disciplined and kept from using the knife in writing the same as in eating.

—SAMUEL L. SCOTHORN,
Pres., AOA, Dallas, Texas.

—What Does He Mean?—

Rotary Club of McMinnville, Oregon.

Dr. Wm. Stryker, Pres.

Dr. W. E. Waldo, Seattle, Wash.

Dear Bill:

I notice in Seattle Rotary Bulletin that for third time this year you are to address your Club. They must have a strong Club there.

Rotarily,

BILL STRYKER.



—Shall Osteopathy Live?—

We are not prepared to state at this time whether Osteopathy as a science shall live or not. What we can state without fear of successful contradiction is that if it dies it will be selfishness that kills it. We might as well be frank about it and quit looking for someone to blame for our present condition. Let's blame ourselves—and change.

We meet and wail about the legislative situation in this and that state. There are only two reasons why the laws are unsatisfactory

in any state, 1st—The profession is not united, and cannot expect to get relief until it does unite. 2d—The profession is satisfied with conditions as they are. I am sorry the latter reason holds good in so many of our states. It's true. I know how many excuses are used to deny this and in looking for excuses one is as good as another. "Stewing in our own juice" I call it, and how happy we are in doing so.

The first reason, that of the profession not being united, can be rectified without much effort. People as wide apart as the poles on any subject can get together and work out a problem if in their hearts they so desire. The second reason—that of being satisfied with conditions as they are is harder to overcome; but it must be done if osteopathy is to live. How? Well, I was raised a Methodist and in order to be saved one had to get down on his knees and purge his heart—yes, his very soul of all jealousies, envy, self-pity and selfishness, and it may be necessary to start a Revival within the profession.

DR. W. E. WALDO.

of modern laboratory diagnosis with the examination of the patient's spine and body.

The time, cost and health-value of making thorough and confirmatory diagnostic examinations are properly stressed.

Then the fact that all osteopathic treatments are not alike, and that none are to be measured by the clock, or by the physical power put into them, or by any other factor but the result secured is beautifully presented.

We're sure you will want this issue at work for you in your community if you read it. Order early and get your supply. You will be disappointed if you don't. *We have not a copy on hand to sell of any one of the last three issues!* Nothing succeeds like success. Enough said.

Order a supply of this January "OH" today and let us help educate your patients and public into right thinking about Osteopathy.

January Issue of "Osteopathic Health" on Sale

"What Constitutes Osteopathic Treatment and Examination" (January) Price 100 copies, contract, \$6.50; single order, \$7.50.

GET LOWER PRICES BY QUANTITY BUYING!

On annual contract orders delivered by express 500 copies cost \$22.50; all quantities from 600 to 1,000 at \$4.00 per hundred.

On single orders delivered by express 500 copies cost \$28.75; all quantities from 600 to 1,000 at \$5.25 per hundred.

Professional card plate free to contractors.

October issue (Osteopathic Catechism)

Sold Out!

November issue (Somebody's Everyday Ills)

Sold Out!

December issue (Winter Disease Number)

Sold Out!

HOW to BUILD PRACTICE by ETHICAL PROMOTION

"What Constitutes Osteopathic Examination and Treatment"

That is the important thing explained in the January issue of "Osteopathic Health." Do you know of a better subject for a preaching to the laity? Is there any phase of our work that you would prefer to put before the people by carefully chosen words in our New Year's issue of the little patient and public educator? This is your chance.

Van Brakle of Portland wrote it. His style is always lucid. This effort of Van's is likewise wholly good.

The broad-visioned folk will love this number for it makes the present patient and the prospective patient alike realize there is a lot more to osteopathic diagnosis nowadays than merely feeling the bumps of the spine. It hooks up all

Ready for Use in your home town newspaper. The "copy" below is for display space. Have your printer follow style of composition.

"Osteopathic Health" for January

What Constitutes Osteopathic Examination and Treatment

What a Treatment "Looks Like;" Treatments Not Weighed or Measured; Preparation for Treatment; Less Than the Usual Exposure; Private Dressing Room System; Treatment Means the Skill of a Specialist; Minutely Careful Body Examination; Use All Scientific Methods of Diagnosis; Its Characteristic Diagnosis Wholly New; One Scoffs at What One Does Not Understand; All Laboratory Tests Are Used; About Treatment Itself; Basically It Is Lesion Fixing; Manipulative Adjustment of Structures; No Two Treatments Are Alike; Skill Not Measured by the Clock; The Fee Covers the Service Rendered; "Is That All There Is To It?"; Faulty Diet and Hygiene a Handicap; The Osteopath as a Health Councillor; Part Adjustment: Part Advice and Regulation; At Basis Must Be Structurally Sound; Don't Fancy It a "Cure All;" Nerves Rule Body; Osteopaths Control Nerves; Osteopathy Appeals Because Understandable; Its Main Tenets Easily Explained.

The above is the title contents of "Osteopathic Health" for January. A copy of this little magazine will be mailed free of charge on request. Address:

DR. _____, _____

Standard Undated Laity Brochures Available

"The Human Body Runs Like an Automobile."—Brochure No. 60, undated. Price 100 copies, \$5.50.

"The Body's Four Grand Systems of Elimination."—Brochure No. 59, undated. Price 100 copies, \$5.50.

"The Osteopathic Specialist in Diseases of Ear, Nose, Throat and Eye." Brochure No. 58, undated. Price, 100 copies, \$5.50.

"Mechanical Causes of Woman's Ills and How Osteopathic Adjustment Cures Them." Brochure No. 57, undated. Price, 100 copies, \$5.50.

"Why Diseases of Stomach and Digestive Organs Develop"—Brochure No. 56, undated. Price, 100 copies, \$5.50.

"Osteopathy in the Inflammatory Diseases." By the late Professor Lane. Brochure No. 8, undated. Price, 100 copies, \$5.50.

"A General Sketch of Osteopathy." Brochure No. 51, undated. Price, 100 copies, \$5.50.

"Osteopathy Potent Where Serums and Vaccines Fail," by Michael A. Lane. Brochure No. 16, undated. Price, 100 copies, \$5.50.

"Most Diseases Are of Spinal Origin." Brochure No. 36, undated. Price, 100 copies, \$5.50.

"Osteopathy as a Science," by John Comstock, D.O. Brochure No. 37, undated. Price, 100 copies, \$5.50.

QUANTITY PRICE

Price in 500 or 1,000 lots \$5.00 per hundred.

"Most Diseases Are of Spinal Origin" for February!!

This parent of all osteopathic campaign documents and chief educative pamphlet of the profession for twenty years will be repeated for the last time as an issue of *Osteopathic Health* next February.

After this reappearance as a current issue of the magazine—which has been arranged for at the urgent request of many contractors who want to use it in quantities now—this peerless campaigner, which has converted hundreds of thousands to the sanity of osteopathic treatment, will take its place at the head of the list of our new series of "Brochures" and will never appear again within the covers of "*Osteopathic Health*."

This is in accordance with our new policy announced to present only new and original articles every month in future issues of "*Osteopathic Health*," and thus give your patients and public who read it always something novel and interesting, which they may never, by any sort of chance, have seen anywhere else before. It is a fine way to keep them interested—this policy of newness and human interest articles, and "*Osteopathic Health*," thus conducted as the patient's magazine, will prove of even greater benefit to your practice than ever before.

Meanwhile be revising that mailing list of yours, friend Wide Awake, and put on all the live names you have got in your files to get the benediction of this great message for osteopathy—a historic document surely which was first issued by HSB twenty years ago, at the time that he dedicated his pen and brain to osteopathic propaganda.

This article, with its historical preface explaining its age, is the best piece of campaign literature possessed by osteopathy today to establish the easy priority of osteopathy in the field of adjustive healing, and to show the chiro claims to be untrue and a fabric of appropriation and imitation. Give this classic preaching of osteopathy a good send off when it appears, friends, and use it as it deserves for the good of the cause.

HAVE YOU A MATURING LOAN TO REINVEST?

If you are fortunate enough to have money out at interest on first-mortgage real estate loan, or otherwise, about to mature, we would like to bring to your attention the attractive features of our limited offering of 8 percent Preferred Stock, Cumulative, in The Bunting Publications, Inc.

This stock issue of \$30,000 is preferred as to earnings as well as assets, so that no dividends can be paid on Common until the Preferred dividend payments of 2 percent quarterly are all met. Bunting Preferred Shares sell at \$100 par and are redeemable at 105, so that they certainly pay you in excess of 8 percent per annum and will probably pay you about 9 percent. See our advertisement giving fuller information on Page 3 of *The Osteopathic Physician*.

Remember, too, that if you put your money in Bunting Preferred Shares it is reinvested by us in the printing machinery that is grinding out national publicity for osteopathy: so that you and your profession alike get a direct benefit from the use made of your money in addition to the good interest rate that you receive.

Furthermore, you are helping us, your professional boosters—helping us very much, in fact—by such a course, for we've got to pay the balance due on our new machinery equipment and, having gone our limit to get as far along as we have, we are now compelled to sell our Preferred Shares to raise the necessary money.

Can you help us finish up this good enterprise in fine style?

We invite correspondence with osteopaths who are of the investment class and will be glad to give any additional information or assurances you may desire.

The Lane Book on Osteopathy

"A. T. Still, Founder of Osteopathy." Includes the Whole Ten Original Brochures on osteopathy by the late Professor Michael A. Lane; bound substantially in cloth covers; 217 pages; with comprehensive Table of Contents and Index. Price \$3.00, postage prepaid, to any address. Edition is nearly sold out. Got your copy yet?

No osteopath's home bookshelf or office center table can be complete or up-to-date without this book. It is invaluable as a standard explanation of osteopathic science for all public libraries, as well as for the information of fairly educated patients. What price wouldn't osteopaths have paid for such a book, had it been available to them ten years ago!

THE BUNTING PUBLICITY SERVICE for OSTEOPATHS

Lane Brochures Still in Print

"Osteopathy in the Inflammatory Diseases," by the late Professor Michael A. Lane, Brochure No. 8, Undated. Price 100 copies, \$5.50.

"Osteopathy Potent Where Serums and Vaccines Fail," by the late Professor Michael A. Lane, Brochure No. 16, Undated. Price 100 copies, \$5.50.

Laity Brochures a Separate Line from "Osteopathic Health"

Now we are in possession of our own fine new printing plant we take pleasure in announcing an important change of policy as regards the issuance of our "Standard Brochures for the Laity." These are to be printed separately from "*Osteopathic Health*" in future, and will be republished as fast and as far as the profession may require them for its purposes. Such Brochures (with possibly but one or two further repetitions, already scheduled) will not find reissuance again within the covers of "*Osteopathic Health*."

When such classics as "Most Diseases Are of Spinal Origin," "The Osteopathic Catechism," "The Body's Four Grand Systems of Elimination," "Doctor Still as a Medical Thinker," etc., are to be printed they will be published in separate form under distinctive covers as Standard Laity Brochures. Ultimately we should be able to supply all our classic brochures in this form—at least, all of them for which there exists perennial demand. We cannot get to this all at once, of course, but we shall approach it little by little as we find time.

This means that we shall now be able to realize our dream of years (which production costs hitherto have made impossible), namely, to make of "*Osteopathic Health*" truly a live journal of current interest, full of seasonal disease discussion and editorials on timely health topics—the organ par excellence with which to educate one's patients, as well as interest and convert the lay public—and to leave the reprinting of articles of merit to go into a separate Brochure series.

About every third issue of "*Osteopathic Health*" will contain a *brand new brochure*, each of which will be as fine and strong as any that have ever been put out by us. These will all be fresh and new. As the best of these new brochures develop permanent demand for themselves they will be reissued if, at all, only as numbers of the "Laity Brochures" Series.

"Harvest Leaflets" Have a Potency All Their Own

It is the supreme merit of our line of 28 different "Harvest Leaflets," ranging from one to eight pages each, that they are the easiest, quickest and cheapest advertising media of high quality that one can put out to special

mailing lists. The cost per thousand persons reached is so low that any practitioner really interested in building up practice or osteopathic prestige in his own field can afford to mail these out in series every week or ten days. The results from using them are found to be so good that any vigorous campaign of this sort, entered into for a period of three to six months, ordinarily pays for itself from new patients obtained before the campaign has entered well into the second month.

The proper strategy involved in the use of "Harvest Leaflets" is to regard them as the low-cost, wide-distribution, quickly-repeating medium for attracting first attention and producing inquiries. All inquiries so produced should at once be put on one's regular mailing list for education by *Osteopathic Health* and selected numbers of our "Standard Laity Brochures." It is usually an easy matter to find out what an inquirer's special interest in osteopathy may be—that is, what and whose disease it is hoped to cure—and then it is only common-sense follow-up science to select and supply such brochures as most nearly cover that subject.

Any one who wants quick and extensive results will be pleased at the productiveness of this system of advertising. And the charm of it is that it benefits osteopathy as a whole by *benefitting most the osteopath who puts this evangelization machinery in motion*. In other words, *the fellow who spends the money gets it back with a profit besides*. That proves quite satisfactory, as a rule, to the one who shows the enterprise.

CASH PAID FOR ACCEPTABLE MANUSCRIPTS

We are in the market for contributions that explain osteopathy, its theory and practice, its diagnosis and cures, in simple plain English suitable for converting the lay reader and educating osteopathic patients. Such manuscripts must be suited for the purposes either of "*Osteopathic Health*" or "Harvest Leaflets": must be typewritten on one side of the paper only and be either single or double spaced between lines. The total number of words by actual count must be given on each article and the number of words on each separate page.

FOR "OSTEOPATHIC HEALTH"

Brochures or other manuscripts offered as suitable material for making up one entire number of this magazine must contain approximately from 3,600 to 4,000 words. We supply the subheads for long articles.

The preference is for short articles explaining a variety of diseases rather than for one long manuscript. Long articles have to possess some definite theme, show artistic unity and logical construction. But any practitioner who is interested in his practice, even though without possessing literary gifts may write the most acceptable sort of simple short articles containing one or more good ideas or dealing with particular diseases, diagnoses and cures. We are able to supply the literary revision, if it be needed, to polish good plain recitals of fact.

FOR "HARVEST LEAFLETS"

Manuscripts offered for "Harvest Leaflets" should conform to one or another of these sizes:

1 page "Harvest Leaflets" average from 100 to 125 words.

2 page "Harvest Leaflets" from 250 to 300 words.

4 page "Harvest Leaflets" from 660 to 750 words.

8 page "Harvest Leaflets" from 1,700 to 1,750 words.

So-called "fine writing" is not wanted. Good plain simple English and truth telling, based upon an underlying understanding of the psychology of "selling" osteopathy to the public, is what we are after. What have you to offer, Doctor? Have you ever tried your hand?

Dr. C. C. Reid—"Personality"

[Continued from Page 24]

the patient might exert with many of his friends. Sometimes a patient, a doctor might think, is of little value as far as the financial remuneration might be concerned, becomes most valuable in his influence, his appreciation and his good wishes.

A cynic is not very likely to be much of a success in the world. Too often we find our doctors are so critical toward their professional brethren in their own town that they can hardly call one another friends. It is an old saying, "Birds of a feather flock together." We find this is not true of many of the osteopathic physicians because of their personality. Professionally they are in the same line, they wish to see osteopathy built up, their profession respected and desire to stand well in their community, yet they are so hypercritical toward one another that they are not only disappointing in their own friendship, but cause the people of their community to disrespect osteopathy or hold it in very low esteem. These physicians stand in their own light and fail to grasp the great opportunities that await them. This not only makes for loss of financial gain but continues to destroy friendship, highest type of personality, fine relations and much happiness.

Many who read this will not have to look far nor think long to find concrete examples of just such situations. My brethren, this should not be. Remedy, refuse to be a detractor or a knocker toward your professional brethren. Refuse to entertain criticism in your mind toward your patients. Look for the good. It is always there in some degree in both patients and doctors. Magnify that in your own mind, draw it out by the manifestation of your own nobility and soon things will take on a different color.

Second. Pessimistic, self pitying, thinks he is mistreated. This characteristic in a doctor's personality is almost inexcusable. Many a patient has left a doctor or failed to employ him because of his pessimism. It is alright to be honest, but at the same time the doctor must be tactful and optimistic, putting the most hopeful construction on his patient's condition, both mental and physical. He should also expect great things in his own life and in his own practice, hoping and working for the best, believing in the great Ruler of the Universe and that the laws of Nature are built according to certain laws that contribute to the well being of one who obeys and takes advantage of them.

Believing in one's self and one's own powers and working to conform with the conditions under which one must labor, there is no reason why a doctor should not do well and be respected by the good people of his community. No pessimism should be allowed to linger in the mind of the doctor, no matter how things may look on the face of it. He should make the fight always for the right and trust God or the laws of Nature for a hopeful outcome.

A few doctors are afflicted with self pity. They think they are abused, not appreciated, that people take advantage of them, they don't have a good chance, the fine opportunities have all passed and they find themselves stranded. This is really a pitiful condition in which to be. The doctor who puts himself on a lonely island to be pitied and then does the pitying is a lot worse off than Robinson Crusoe ever was. He may have virtues, great ability, and much power, but as long as he is in this state of mind he will not show any of these good qualities to advantage where people will realize that they exist to any worthwhile degree.

Third. Too much talk. Some years ago a doctor moved into a certain city and called on some of the local osteopathic physicians. A very friendly and kindly conversation took place. As long as there is no stress, the average person's faults, altho they may be many, may not show up to any appreciable extent.

This doctor seemed very agreeable, but one small thing seemed to point up, however, about him in this first conversation with the local doctors. After he had gone, one of the doctors gave expression to this, "Dr. Blank seems to be a very fine fellow." One other doctor immediately remarked, "He talks too much." On thinking it over, this was a little bit in evidence at the first meeting.

He located in the town. After two or three years of experience in the city, the fact that he talked too much was demonstrated over and over among many other glaring faults that interfered with any legitimate success on his

part. He could not harmonize with his professional brethren; he was not on the level; wasted his time in talking about many irrelevant things in his office as well as outside.

We should stick strictly to business, make the examination, diagnosis, tell the patient what we can do absolutely from a business standpoint and deal with him only in regard to the thing for which he came and do it in the best, easiest and quickest way, saving his time and our own. All busy people like their dealings to be brief and to the point.

(To be continued)

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to Reach the Multitude and Arouse the Disinterested

Our new line of introductory and supplementary printed leaflets is designed to enable osteopaths to do wider and more systematic campaigning at unprecedentedly low rates per thousand (or per hundred) of names covered. These informal messages make easy and economical the undertaking of broadcast distributions and engineering systematic rapid-fire follow-ups where the cost of using a magazine would be felt as a deterrent factor. You can economically and speedily cover entire lists of any size by this medium and command instant attention. The harvest will be proportional to the sowing. Let us tell you how to plan and conduct such campaigns. Here is the splendid assortment of subjects offered you:

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- 16. What Osteopathy Does for Women.
- 17. Osteopathic Aid in Pregnancy and Confinement.
- 25. Osteopathy in Obstetrics.

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- No. 18. Habit in Suffering.
- 19. The Osteopath's Point of View.
- 20. An Osteopath.
- 21. The Nine Modern Wonders.
- 22. Osteopathy Is Not a Remedy.
- 23. Dr. Atzen's Definition of Osteopathy.
- 26. Pain.
- 27. Insomnia.
- 29. Sciatica.

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\$0.75 per hundred.

Imprinting your professional card is FREE on all orders bought in thousand lots. On any number (or assortment) from 100 to 900 it costs \$1.00 extra. These folders are sized to go in an ordinary letter envelope.

These osteopathic "Harvest Leaflets" do not take the place of campaigning by Osteopathic Health, but supplement it. They are scaled for easy, economical, wide distribution in units of thousands instead of hundreds, and are adequate to supply your want of something effective that will stir up quickly numerous inquiries about osteopathy. You should use them as "attention-getters". As each new inquirer is heard from you should automatically put him on your mailing list to receive Osteopathic Health, the magazine, monthly for a year's period. That is campaigning as scientific propagandists of any worthy cause would do it. We have only begun to fight for Osteopathy!

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"Wonderfully Well Pleased" with "A. T. Still; Founder of Osteopathy"

Dr. O. R. Meredith,
Nampa, Idaho

April 9, 1921

Your book, "A. T. Still, Founder of Osteopathy" by M. A. Lane, came this morning and I am wonderfully well pleased with the appearance of the same.

Your "Foreword" speaks well for the volume. The contents, so well paged, as well as your "Index" are very commendable. A person should be able to get at any subject that he wishes from this. The book is handsomely printed and aptly bound.

For one, I pledge myself to buy more osteopathic books than ever in the past.

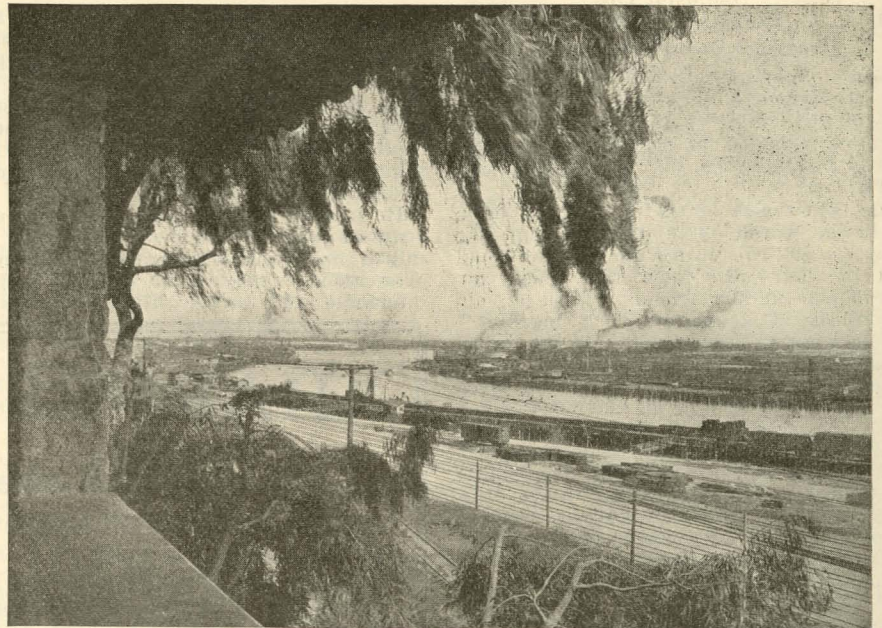
Yours for an osteopathic literature,

O. R. MEREDITH, D.O.,
President of W.O.A

Get your copy before it is too late!

Price \$3.00

The Bunting Publications, Inc.
Waukegan Illinois



"A great many are planning to go by water to Los Angeles for the National Convention, July 3rd to 8th. The Committee on Arrangements has provided for a Reception Committee in 'Middies' to receive the Easterners at the Los Angeles \$20,000,000 harbor."—T. J. Ruddy, Chairman Publicity Organization.

HO! "SHOP TALK" ASSISTANT EDITORS!

Please send in for "Shop Talk" next issue some one good idea or helpful fact that you have learned in practice. What you can say on a post card will do.

Or maybe you want to go on record about Dr. Woodall's plan to give a chiro degree for one year's work in osteopathic colleges. We'll

present more views on that subject next month.

Meanwhile, won't you send some one helpful idea in diagnosis or practice? If it helped you, it will help some one else. Kick in, with a good idea, fellows—HSB.

Osteopaths have expressed their indignation to President Harding over not being invited to the arms conference.—Philadelphia North American.

PROFESSIONAL CARDS

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ially equipt "surgery" in common.
501-10 Interstate Trust Bldg. Denver

What 10-Finger Practice Did for Gamble

Foot note to a letter: Parenthetically, I'm going to admit that my arithmetic for the first time was found unpardonable by the income tax man; so they soaked me a jolt of over a hundred dollars on top of last spring's remittance to Uncle Sam. My own figures were to blame, so I had to take it good naturedly. Well, anyhow, I must have earned and collected it or I wouldn't have had to pay it. So why repine?—*Harry W. Gamble, D.O., Missouri Valley, Iowa.*

Books! Books!
for Osteopaths

Keep your library up to date! Look over this list and place your order for what you haven't got.

- Poliomyelitis—Millard\$4.00
- Applied Anatomy of the Spine—*Halladay*\$3.50
- Osteopathic Descriptive Anatomy *Laughlin*\$6.50
- Practice of Osteopathy—*McConnell & Teall (1920)* \$7.50
- Physical Diagnosis and Diseases of the Chest—*Norris & Landis (1920)*\$9.50
- Diseases of the Head and Neck—*Deason (1921)*\$2.50
- Manual of Technique and Osteopathic Anatomy—*Goetz*...\$3.00
- Analytic Cyclopedia of Practical Medicine—*Sajous (8 Vol.)* \$64
- Quiz on Osteopathic Practice—*Laughlin*\$1.50
- Quiz on Obstetrics and Gynecology—*Clark*\$2.00
- 500 Osteopathic Pathology Questions—*Hoffman*\$1.50
- History of Osteopathy—*Booth*\$5.00
- Autobiography of A. T. Still \$2.50
- A. T. Still, Founder of Osteopathy—*Lane*\$3.00
- Therapeutics of Activity—*Gour*\$4.00
- Osteopathy, the Science of Healing by Adjustment—*Woodall*\$0.75
- Concerning Osteopathy—*Webster*\$2.50
- Food Fundamentals—*Bean*..\$3.00
- Something Wrong—*Webster* \$0.75
- Health and Life (Partial Fasting Method)\$1.00
- The Allen Treatment of Diabetes—*Hill and Eckman*\$1.75

Prompt attention given to all orders. Tell us about any book you want.

—The—

Bunting Publications, Inc.
Waukegan, Illinois

Dr. Overfelt Now Acquiesces

In the October issue of *The OP* some statements were published over my signature pertaining to the Colorado State board revoking my license to practice in Colorado for which I want to apologize.

A meeting of the Northern Colorado Osteopathic Association was held in Boulder, Oct. 1st, for the purpose of discussing this matter and to take some action in the case.

Dr. D. L. Clark was at this meeting and after he discussed the case from start to finish I am convinced that the board was justified in taking my license and I decided at this meeting (and so stated to them) that I would abide by the board's actions in the matter and would close up my office and go away and take post-graduate work this coming year.

I want to apologize to Drs. Clark and Wren for the uncomplimentary way in which I spoke of them as members of the board, for after Dr. Clark's talk in this meeting I am fully convinced they both are doing all they can for the good and promotion of Osteopathy as members of the board.—*L. B. Overfelt, D.O.*

Boulder, Colorado, Oct. 19, 1921.

Dr. Bashline Will Continue Surgery!

Dear *OP*: You will receive in a few days a transcript of the entire proceedings of my trial and conviction for practicing surgery. We must organize and get into politics to save our professional status. We are already late beginning.

I am continuing the practice of surgery as my counsel has advised me to do so. We have organized an Osteopathic Protective Association under the direction of men outside of our profession. The M.D.'s want to corner us on surgery, obstetrics, the use of anesthetics, antiseptics, opiates, etc.—Should they do this we are fixed and cannot develop. Shall we let them stop our clock?

You should receive a paper with an account of the trial as we mailed you one some time ago. Shall we stand in the bushes and let them shoot at us?—*O. O. Bashline, D.O., Grove City, Pa.*

Chicago College Off On Woodall Scheme

I have just read with interest Dr. Winslow M. Kingman's statement in Nov. *OP* in regard to the Osteopathic Colleges giving the D.C. degree. It seems to me that the doctor has analyzed this problem correctly so far as the Chicago College of Osteopathy is concerned. The registration in New York State would prohibit our college from granting the D.C. degree, if we wanted to, and at the present time there is no indication that the college will change its educational policies or standards. The osteopathic colleges have been developed to teach Osteopathy and if they are going to do their best for the profession they should stick to that program—*Geo. H. Carpenter, D.O., President, Chicago College of Osteopathy.*

Men Have Died for Less!

In some way the Boyd City Dispatch of New York, list makers, listed me as a chiro. I have written them regarding the matter and I wonder if you would help remove the stigma by telling the profession "Taint so." Would you enter suit if you were I? Thanking you for this antiseptic bath.—*Fraternally, W. C. Daves, D.O., Bozeman, Montana.*

If It Pops

"Don't kid yourself into thinking you have made an adjustment just because you have 'popped' the joints in somebody's spine." Be more honest and conscientious than that—*T. M. Gunn, D.O., Great Falls, Mont.*

McCole's Great Idea

Great Falls, Montana, Nov. 22, 1921.

Dear Doctor Bunting:

Will you help in applying a profound psychological law to the betterment of the Osteopathic Profession?

Being an editor, I know you believe in psychology and you have the advancement of the editors of Osteopathy at heart.

I am writing to fifteen editors asking them to join in this. I am confident they will all do so.

What I would like to ask you to do is to print four to six times in each issue of your journal the following:

"Where There Is No Vision, the People Fail."

Run this psychological experiment through your numbers beginning with the January and ending with June, which will take it up to the annual convention.

What a wonderful thing it will be to get the whole profession enthused with a vision of loyalty and better things for Osteopathy! You can see what an influence this little sermon will have repeated five times in each of six numbers put out by fifteen publications.

We will all take a great deal of interest in watching the idea develop.

For greater and better things for our profession, I am,

Fraternally and sincerely yours,
Geo. M. McCole.

"Where There Is No Vision, the People Fail."

[Bully good idea, George, and we will be glad to co-operate.—*HSB.*]



Dr. T. J. Young on Osteopathic Board

Dr. T. J. Young, of Fremont, Nebr. has been appointed to the Nebraska Osteopathic Board, to fill the vacancy made by the resignation of Dr. F. E. MacCracken of Beatrice, Nebr. Dr. Byron S. Peterson, Omaha, has been re-appointed.—*Byron S. Peterson, secretary.*

New Firm of Osteopaths in Rapid City, S. D.

Dr. Mae Redfield and Dr. Alma Anderson, have opened a suite of offices in the Hill Apartments, Rapid City, S. D. Dr. Redfield is the pioneer osteopath of the Black Hills, coming to Rapid City immediately after graduating from college. Dr. Anderson received her training in the Los Angeles School of Osteopathy, where she also took post graduate work.

A New Sanitarium for Orlando

The contract has been let by Dr. J. C. Howell to transform his apartment house into a sanitarium. Ryan and Roberts, the architects, have planned to have the work done in units. The first unit, which will have a capacity of about twenty-two beds in emergency, will be ready for occupancy about the middle of November.—*Orlando, Florida, Morning Sentinel, October 8th.*

Twenty Years in One Location in One Office Can You Beat It?

The other day Dr. John W. Riley of Norwich, New York, reported to us that he had enjoyed a very satisfactory practice for the year 1921 and he called our attention to the fact that he has now been in practice twenty consecutive years in the same offices in the city of Norwich. Is there any other practitioner who has practiced twenty consecutive years in the same town and occupied the same suite of offices through the entire period?

Osteopathy and Foot Ball

Temple, Texas, has a foot ball team which it is justly proud of. Many times during the past season has this aggregation of huskies, who style themselves the "Temple Wildcats," covered itself with glory. Their success, it is openly avowed, is in large part due to the efficient osteopathic aid rendered the team by Dr. H. B. Mason, whose careful and successful attention served to keep the boys in perfect physical condition throughout the entire season.

More of Dr. D. D. Howe

Following our warning to D.O.'s in the November *OP* we got this further information about Dr. D. D. Howe: "Dr. Howe is an osteopath who graduated from the ASO in the year 1914. His mother lives at El Paso, Texas, and he calls it home though he never practiced there. There may be many Osteopaths who will remember him better when they are told that he was familiarly known as 'Tubby Howe.' The ASO will give anyone interested his mother's address. She has always made good any losses caused by 'Tubby.'—*D.O. in Oklahoma.*"

"Where There Is No Vision the People Fail"

Washington State Examinations

The next examination of the Washington State Osteopathic Association will be in Olympia, January 24th, 1922. Write Department of License, Olympia, for examination or reciprocity blanks. I am also glad to give information—W. T. Thomas, D.O., Secretary.

Location Open at Titusville, Florida

There is at present no osteopathic physician located at Titusville, Florida. Several families of the community are interested in Osteopathy and it is believed that a satisfactory osteopathic practice could be developed in the community. The town has about 1,500 population. For further information address Mr. John Thomison, care of Montrose Orange Groves, Titusville, Florida.

One of New York's Pioneer D.O.'s Passes Away

We have just received word of the death, on October 26th, at Atlantic City, of Dr. Wm. M. Smiley, of Albany, N. Y., pioneer and staunch champion of the interests of Osteopathy. Though he had not been in good physical condition for several years, his death was entirely unexpected and came as a great shock to his family. His passing away is mourned as a great loss, not only by his family but also by his many patients for whom he was ever a faithful and zealous physician and by his fellow members in the various osteopathic organizations to which he belonged.

Iowa Elks Honor Dr. Cluett

Dr. F. G. Cluett, present past exalted ruler of Sioux City lodge, No. 112, B. P. O. Elks, was installed as district deputy grand exalted ruler for western Iowa at the regular meeting of the lodge Friday night, October 7, having been appointed to this position by Grand Exalted Ruler W. W. Mountain, of Toledo, Ohio. The installation service was in charge of former Past Ruler J. P. Gibson, who administered the oath of office. Dr. Cluett will have jurisdiction over all the lodges of the Elks in the western half of the state. Dr. Cluett has been an officer in the Sioux City lodge for the last seven years. His appointment as deputy grand exalted ruler for half of Iowa comes as a reward for his work in Sioux City.

Solve Your Chiro Problem

It doesn't pay to fight chiropractic. To appear prejudiced against it only reacts to its good. Most chiropractic literature in use appears vindictive to the reader, at the same time telling him nothing definite. There is one little brochure written by Dr. Eugene F. Pellette, graduate of the ASO, which is probably the best that has been written on this subject for the laity. It states facts in a forceful and simple manner and every osteopath who has chiro to contend with owes it to himself, to the public, and to his profession to keep a supply on hand, to hand out to those patients who inquire as to how the two systems differ. Dr. Pellette will be glad to send every one who asks, a sample of this brochure. He has them for sale, and you will find his ad in the Exchange and Market column of this issue.

American Legion Support For Osteopathy Solicited

That the cause of Osteopathy had a champion at the American Legion's Convention at Kansas City, is evidenced by the following letter from Mr. Wm. Q. Setliffe, Department Adjutant of Illinois, to Dr. Lee A. Brown, White Building, Charleston, Illinois. "My Dear Doctor: In answer to your letter of Oct. 22nd in which you ask me to help put over the Osteopathic Bill which is going to be presented at the Kansas City Convention. You can rest assured that I will do all I can when this comes up to help put it through, for no one knows any better what osteopathic treatment for broken limbs, etc., means than I do. Yours very truly, Wm. Q. Setliffe, Department Adjutant." Mr. Setliffe was Dr. Brown's captain while in service and was treated by him both here and over-seas for a broken limb.

PERSONAL

Dr. John P. Kilb has announced his location at Greenwich, Connecticut, with offices in the Smith Building.

Dr. W. A. Gravett announces change of offices from 720-23 Reibold Building to 922-23 Reibold Building, Dayton, Ohio.

Dr. Harry E. Sinden, formerly of Hamilton, Ontario, has announced the opening of offices for the general practice of osteopathy at 341 Madison Avenue, New York City.

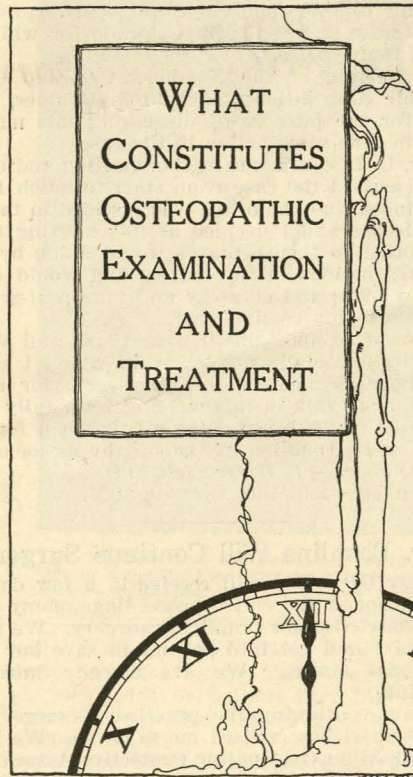
At the last meeting of the Rotary Club of New Orleans Dr. Henry Tete was the speaker of the day, his subject being "Three Great Laws of Health or Why Men Grow Old at Forty."

Dr. J. M. Diehl of 401 Hulett Building, Elmira, New York, announces that after December 1st he will be located at 615 W. Church Street where he will have more room and better facilities.

Dr. Clara DeGress McKinney, formerly of Cincinnati, Ohio, has located in Los Angeles, California and has announced the opening of her offices for practice. Her rooms are in suite 332 Bradbury Building.

Dr. W. R. Byars announces the removal of his offices from 309 Owl Drug Building, San Diego, California, to 562-63 Spreckels Building, where he will be pleased to receive all his old patrons as well as new ones.

Osteopathic Health for January



The New Year is approaching and it is time for you to act if you want to make best use of practice promotion advertising in 1922. Begin with the January issue of OH with its dandy and delightful talk about osteopathic examination and treatment. It's as popular and entertaining as can be but the reader gets lots of real information out of it just the same. To be assured of starting with this issue your contract order must reach us promptly. Resolve on an advertising program to make 1922 your banner year in practice. We welcome your wishes!

Watch Out For!!!

"Most Diseases are of Spinal Origin"

It is the February issue of "Osteopathic Health" and bears the seal of personal approval of Dr. A. T. Still as being the best type of field literature ever written. Order in advance. The issue will not be overprinted. You see we are not overprinting *any* current issue now. December, November and October issues are already all sold out—not another copy obtainable! Don't be late! Order this February issue in advance. Use 1,000 of them.

A collision occurred on the Chicago and Oak Park elevated line November 17th. Dr. C. C. Klumph of Chicago was caught in the smash-up and suffered a broken collar bone. He was taken to the Garfield Park Hospital for attention. At last report Dr. Klumph was making good recovery from his injury.

Relatives of Dr. Downey of Chanute, Kansas, who died on July 1st, request us to publish a notice of his death in our publication for though his school publication bears the announcement it seems to be generally ignored in the profession as almost every day osteopathic literature and mail comes to him at Chanute.

Doris Jones Bowlby, formerly of El Paso, Texas, having taken a P. G. course at Chicago College of Osteopathy for one year, specializing on the eye, ear, nose and throat, and is now located in Brookville, Pa., with offices at 135 Jefferson St. Dr. Bowlby has also taken a special course on the eye from Dr. Edwards and special work on "correcting imperfect eyesight without the use of glasses" from Dr. Bates of New York City, and is obtaining marked results with her patients.

Dr. Dewia Hegwer, who graduated from Kirksville in 1916, and more recently practiced in North Bend, Nebraska, has been appointed to the Interne Staff at the Detroit Osteopathic Hospital and is doing efficient work. Miss Dorothy Case, a graduate from the University of Wisconsin, has taken up her duties as Dietician in the same institution. She came from the Youngstown, Ohio, Hospital Association, and is proving her worth in this important phase of hospital work.

Dr. C. M. Bueler of Tecumcari, New Mexico, was in Chicago not long ago attending a special meeting of the District Deputies of the Benevolent and Patriotic Order of Elks, he being the District Deputy Grand Exalted Ruler of the organization for New Mexico. While in Chicago he found time to run out to Waukegan and take a look over the plant of The Bunting Publications. A pleasant visit was enjoyed. Dr. Bueler is enjoying a very satisfactory practice at his location and has built up considerable prestige for himself in the community. Not long ago there was a small typhoid epidemic in the town. There were 13 cases. Dr. Bueler handled 7 of the cases and had a successful outcome in all of them. Six of the cases were handled by M. D.'s of the town and of these 6 cases 2 were lost. This record makes a very nice demonstration of the efficiency of Osteopathy in emergency fever cases.

DIED

Dr. Wm. M. Smiley of Albany, N. Y., October 26, at Atlantic City.

BORN

To Dr. and Mrs. E. R. Sluyter of Royal Oak, Michigan, July 4th a daughter.

EXCHANGE and MARKET

FOR SALE—A thoroughly established \$1,500.00 practice in Ontario. Will sell cheap, lease given buyer. Address No. 323, care of The OP, Waukegan, Ill.

FOR SALE—"Some Differences Between Osteopathy and Chiropractic." Write for free sample and prices. Dr. E. F. Pellette. Liberal, Kansas.

FOR SALE—6199 D.O.'s received Sample Page Osteopathic Appointment Book. 15-20-30 minute period. Price \$2.00. Send on 30 days trial. E. H. Cosner, D.O., Dayton, Ohio.

WANTED—Associate in office with two other physicians to do general practice and all eye, ear and nose work of office. Address No. 324, care of The OP, Waukegan, Ill.

ASSISTANT WANTED—Young man who can do routine laboratory work including Wasserman. Prefer single man just out of college. General practice with good opportunity for advancement. Send picture with full particulars of qualifications first letter. Address No. 325, care of The OP, Waukegan, Ill.

FOR SALE—Osteopathic-Hydropathic practice in New Jersey city of 120,000 population. Well established. Suitable for a man and wife. Will sell home and office. House brings \$300.00 monthly rent. Reason for selling, present owner retiring. Price and other particulars upon request. Address, Peter B. Shelton, 1135 East Jersey St., Elizabeth, N. J.

FOR SALE—Practice in Southwestern Michigan City of 7,000. Home furnishings, office equipment and car. Only D.O. in city and one other D.O. in county. Office steam heated and best location in city. Excellent future for D.O. with lots of PEP. Here is an opportunity for the right party to step into a well furnished home and office and a good practice to start with. Wish to take P. G. work and will sell for the small sum of \$3,250.00 cash if I can sell before January 1st. Come look the place over or write for further information. Address No. 322, care of The Bunting Publications, Inc., Waukegan, Illinois.