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DEVOTED
TO THE

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MARCH, 1908

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FIELD EXPERIENCES AND THEIR LESSONS.

(An address given before the Atlas Club by Dr. Sage.)

GENTLEMEN:—I have been asked on several occasions to speak before you and a few weeks ago consented to do so, not realizing however, at the time, what it meant. After thinking carefully over the matter, I concluded to talk of my own experiences in the field, while not as an osteopath, at any rate, as a physician.

To-day, I may say that I am an osteopath through and through, and when I finish my course next June and get a sheepskin bearing "A. T. Still's" signature, I shall have profited by my experiences here and by my affiliation with the members of this club. True to my obligations now, I shall try to give to you what benefits I can. I trust you will overlook anything that would seem illogical or not orthodox, for the privilege of speaking before your intelligent body has never before been mine.

In the first place, we should ask ourselves if there is anything we should add to the scientific knowledge to be attained here, that will increase our success in the life work we all are to begin after leaving here. I should answer most emphatically, "yes." For instance, a certain amount of professional tact and business sagacity are just as essential to the success of the osteopath as the compass is to the navigator. There is nothing more pitiful than to see a worthy fellow, deficient in these qualities, waiting year after year for a practice, and a consequent sphere of professional usefulness, which never comes.

Now in order to achieve success and become useful, strive to start right, for unless you make some sure mark, acquire a reputation and build up a practice in the first four or five years, the chances are that you never will.

The location and appearance of your office will have a great deal to do with your progress. Do not locate on a back, unfrequented street, or other out-of-the-way place, as that would naturally suggest to the public either a defective ambition or a mistrusting of your own acquirements. Choose a good, light, airy, and accessible office, as near as possible to the offices of the most popular and energetic physicians of the

town. You will always find these as near to the main artery of the place as possible. Once your office is selected, exercise care in its arrangement; let it look fresh, neat, clean and up-to-date, thus showing that you are possessed of good taste and gentility as well as learning and skill; and that yours is the office of an earnest, working, scientific osteopath, who has a library, takes journals, and is posted in the literature of his school. Use forethought in the arrangement of your furniture, instruments, skeletons, and so-forth. It is not unprofessional to leave exposed your microscope, stethoscope, and other aids to precision in diagnosis, or diplomas, certificates of society membership, pictures of eminent professional friends and teachers, professional relics and keepsakes or anything else that is especially associated with your osteopathic studies and career.

Establish a regular business policy in the beginning. Have your office in readiness at the proper hour, and in all other respects, let it show attention and system.

An osteopath will, in all probability, be judged to some extent, by the company he keeps, so beware. Do not let your office become a lounging place or your name associated with billiard parlors and barber shops; and especially not with drinking and gambling dens. If you have entered upon either of the last two roads, turn from it at once, for they lead downward and will destroy your finer sensibilities, prove fatal to every ambition, and finally blast your career. It will mean professional suicide. Let your associations be, as far as possible, with professional brethren and people of genuine worth. Virtue alone, will make you happy and enable you to withstand your critics.

Put not a feather's weight upon the honorable ambition of any one, or a straw in the pathway of his worthy aspirations. I believe it is much better to have friends than enemies.

Try to give benefit and satisfaction to every patient that comes to consult you, that every one may go away with a clear idea of what is the matter with him, and with a belief that you will do your best to remedy his trouble; for each one will, while in your office, form some definite opinion of you, and ever after, will give you either a good or a bad name.

If you take up a regular practice and are summoned to a case of colic, convulsions, accident, etc., go, if possible, immediately. Then, if you are too late, you will have no cause for regret, nor chagrin, nor will you be responsible. Sometimes you will find that you will have duties equally urgent, when you will have to act judiciously, according to the circumstances.

You should live comfortably for the sake of being comfortable, and

rest as much as possible on Sundays and at night; and, if you would avoid breaking down your physical health, as hundreds of our profession have done, and will do, consider it a cardinal duty to get your meals and your sleep as regularly as possible. Also arrange to take at least two weeks of vacation and rest every year,—every busy osteopath needs to do this much for the benefit of his health.

Every physician should keep himself neat and tidy and avoid slovenliness and anything suggesting carelessness or neglect; above all else he should wear a scrupulously clean shirt and a spotless collar. Who ever saw a bank swindler or a confidence man dressed shabbily or appear coarse. Now, if these tarnished characters with blackened hearts can hide their deformities as with a veil, from all but a few who know their true character, by assuming the dress and manners of a gentleman, we can see that these things are just as important for those who are gentlemen and members of an honorable profession. Do not ignore the fashions of the day, due regard to the customs prevailing around you will show your good sense and discretion. It is not necessary to be a leader in frivolous fashions, appearing as though foppishness had overshadowed everything else; nor to display glaring neckties, flashy pins, fancy canes or any other peculiarity that would indicate a desire to be a so-called "society man," or a "swell." These individuals may have their admirers, but they are not usually chosen by worthy persons seeking a guardian for their health. If you are ever so poor, strive to maintain a "genteel," poverty, for an osteopath's dress, manners and bearing should all agree with his dignified calling. Neglect of neatness and want of polite, refined manners may cause you to be criticized and shunned. You will see some whose heads are comparatively empty succeed almost entirely by attention to appearances and affability of manner, while many much better qualified will fail by reason of defects in these apparently trivial matters. Clean hands, well shaved face, polished boots, neat cuffs, gloves, fashionable clothing, all indicate gentility and self-respect, and give one a pleasurable consciousness of being presentable. The majority of people will employ a well-dressed physician much more readily than one shabbily dressed; they will accord him more confidence, expect more of him, and pay him larger bills.

I believe it is best to avoid double callings. Divorce osteopathy from everything else. Try to make your acquaintances principally through your merits as an osteopath, as this will be an advantage to you both profitable and constant. It is proper to seek reputation by all legitimate means. Cultivate a professional manner and spirit. Merely to gain popular favor, do nothing that does not accord with both the

letter and spirit of the code. Independent of the idea of degradation, it would, of course not do to trust to tricks for business of any kind; for the veil that covers such attempts is generally too thin to hide the real motive or to turn aside ridicule. Public opinion is the creator of reputation and should be respected, for a good reputation is a very large part of your capital. Let your conduct be fair and square to every one on all occasions, you know the window is open to every variety of individuals, and all kinds have entered. Strive to build a reputation for uprightness that will excite the respect of all, friendly or otherwise, and convince them that you are incapable of any dishonorable act. Observe the "Golden Rule" with dignity and leave the balance to time. Osteopathy is an honorable calling,—resolve that it shall not be the less so from your practicing it. Remember that honor and duty require you to do right, not for policy's sake, but because it is right. Do not expect justice from your enemies in return, however, for were you as chaste as ice and as pure as the snow that falls from heaven, you could not escape misrepresentation by adversaries with evil eyes and lying tongues. You cannot stop people's talking about you. So, pay no attention to it, even though it reaches your ears that some person has said that he has no faith in you whatever, that he would not call you to attend a sick kitten, etc. Such talk should not disturb you in the least, simply remember that remarks of this nature are not personal, but are mere expressions of lack of confidence in you, professionally. I have encountered the same obstacles many times,—just, "saw wood." Such things are said about every physician in the world, and although they grate harshly upon the ear of the one they most concern, they are quite different from personal libels.

The reputation of being a "very nice man," is with many, even more potent than skill. To be affable and skilful too, is a very strong combination,—one that is likely to carry its possessor to the top wave of popularity. If you are especially polished and moderately versed in osteopathy, your politeness will do you a great deal more good with the public than the most profound acquaintance with histology, pathology, and other scientific acquirements.

Cheerfulness is a never failing source of influence. Osteopathy is not a gloomy profession, but one that is bright and happy. While allaying pain, relieving some, curing others, and administering hope and comfort to their minds, you will fully realize the great good your profession enables you to do, and will naturally feel happy and satisfied with your results and your life-work, and this should give you a cheerfulness which will be of necessity apparent. Study to acquire an agree-

able manner of approaching the sick and in taking leave of them. There is an art in entering a patient's room with that calm, earnest manner that shows interest in his case and an anxiety to know and relieve his condition,—making the necessary examination, giving the proper treatment, and then departing with a cheerful demeanor that inspires confidence on the part of the patient and his friends, and a belief that you can and will do for him all that your science teaches anyone to do. You have all noticed that the appearance, the walk, the movements, the language, and gestures of some physicians are pleasing; while those of others are rude, harsh and repulsive to the sick. The art of keeping hope and confidence alive in the bosom of the patient and his friends is an important one. To this end, a cheering word will sometimes do almost as much good as a specific or general treatment.

To be quick to see and understand your duty, and equally prompt in doing it as if possessed of inborn acuteness of perception, is one of the strongest points that you can possess.

Always control your temper and be at easy composure under whatever provocation you may encounter. When visiting a patient, neither tarry long enough to become a bore and compel the wish that you go, nor make your visit so brief or abrupt, as to leave the patient feeling that you have not given his case the necessary attention.

The world is full of objects of pity. Probably no busy physician can give full time and exert his entire skill in every case that appeals to him, or throw into it his whole heart, or even feel any deep personal absorption in the sufferings of every patient to whom he is called. If he did, the endless chain of misery that he sees would, through over-care, and grief soon unfit him for active practice. But you can and should manifest at least some anxiety in all cases and avoid exhibiting indifference in any.

Approach the sick with soft steps and use kind words with them. Humanity or the lack of it in a physician can in no way be so accurately judged as when he is questioning and examining the sick. The voice, the cautious touch, etc., all do a great deal to soften the pillow of sorrow and affliction. You must depend, of course, on your skill in curing the sick; you will find nevertheless, that but few patients judge the amount of technical or scientific knowledge you have. The majority are governed by the care and the devotion you exhibit and form their opinion of you and measure your services by the little details of routine attention.

In times of sudden sickness and alarm in families, there is a peculiar susceptibility to strong impressions. Kindness shown then is doubly appreciated. Indifference or coldness, on the contrary, may sever

attachments, and end friendships that have existed between physician and family for years, and that, in as many moments. Many of you will permanently secure a good family by kindness and perseverance in such cases as colic, convulsions, accident; or by unwearied attention in cases of typhoid, scarlet fever, etc.

When called to attend a case previously under the care of another physician, especially, if the patient and friends are dissatisfied with the former treatment, or if the case is likely to prove fatal, do not discredit the previous attendant by expressing a wish that you had been called sooner, or criticise his conduct or his treatment; it is cowardly and mean to do either. Remember in all such cases to reply to the question of the patient or his inquiring friends that your duty is with the present and future, and not with the past. Do not mention at all the physician you have superseded, unless you can speak clearly to his advantage. As a rule, the less you say about previous treatment the better. Courtesy, truth and justice should mark every step of your career. Defend the reputation of an absent professional brother, when justice demands it, but do not let objection follow up every trifling infringement, difficulty, or apparent contradiction: Of course a certain amount of jarring and clashing in a profession like ours is unavoidable. It is both embarrassing and inconvenient to pass and repass any friend or neighbor between whom and yourself, there has come a feud.

Be careful not to infringe upon another doctor's practice, and never attempt to retain any to whom you may be called in an emergency, unless you are preferred. Let your conduct towards other doctors in these matters be honorable, and just, arising from a desire to do only that which is right, as it will be discovered in due time, and will make your pathway more pleasant. Never visit a patient who is under the care of another doctor, without his consent, unless he has been formally notified of the change, by the friends. You will often be called to a patient, only to find that he is under the care of another physician, and you will, of course, refuse to attend. You will almost surely be urged to "just look" at the patient, and give your opinion, or to treat him, with the promise that the other fellow shall not be told of your having done so. Remember your code, and firmly refuse their solicitations—you should positively not interfere except in a case of great emergency. If you do consent, you should do so for the attending doctor, and you should send him a note, telling him what you have done. Further, take care not to make any charges.

Wisdom, in recognizing cases likely to involve you in suits for malpractice, and in foreseeing and forestalling the suits themselves, is a

valuable power. Take care that this wisdom does not come too late. Never fail to send your bill promptly to dissatisfied patients, who are threatening to sue you, or attempting to injure your practice unjustly, whether or not you expect them to pay. It gives you a better position before the public, and raises an issue, which to some extent, checkmates theirs. Do not fail to charge the maximum fee in all these cases.

Steer clear of all practices and alliances in which your part would not bear legal scrutiny, and you will not only safely pass the shoals of shame and bitterness, upon which so many have been wrecked, but you will have a positive reward—the approval of your own conscience. When you are pressed to produce an abortion, on a plea of saving a poor girl's character, or to prevent her sister's heart from being broken, or her father from discovering her misfortune, and committing murder, or to prevent the child's father from being disgraced, or to avert the shame that would fall on the family, or the church scandal, etc., you should answer with a chilling and emphatic refusal, never for a moment entertaining such a proposition. How could any one but a fool be induced to take the burden from another's shoulders to his own, by committing a crimson crime; to violate both his conscience and the law; to risk exposure, social disgrace, and professional ruin, and even the penitentiary itself. All this simply because he has put himself into another's guilty power, either for a favor, or a paltry fee.

Evil rumors fly rapidly. The production of a very few criminal abortions will give you a wide-spread and long continued notoriety. Sometimes even a single case will be the fatal one, resulting in the ruin of a career which otherwise might have been bright. Be very cautious in treating females where menstruation has ceased, and pregnancy is feared. At least be sure you know the patient's motives, and treat accordingly. You may sometime encounter a case, in which you believe the production of abortion is necessary to save the mother's life. If you should, do not consent to perform that operation secretly, but only after consultation with some other physician in good standing.

Do not hold yourself aloof from the profession, but identify yourself with it in all public matters, at conventions, assemblages of alumni, at meetings called to provide entertainment for visitors, or, to pay tribute to deceased brethren of your profession, or to give attention to matters of public danger or hygiene, or of legislation in your state. Keep in touch with what the medical profession are doing, especially the "American Medical Association." For the aim and object of this association, is the complete domination of the sale of drugs and the practice of medicine, in the United States. It seeks to be dictator of, "Medical Ethics,"

and sole custodian of the conscience of the profession. It aims to suppress all schools of medicine except those of allopathy, and it hopes to obliterate all such practices as Osteopathy, along with the various so-called "Sciences." Day by day, it is drawing the lines more closely around Osteopathy, and seeks to outlaw all the various "schools," which are less firmly established than the "Regulars," by inducing legislatures to adopt the "The one board idea." This later means that one medical board examines all candidates for admission to practice. The allopaths can virtually dictate to homeopaths and eclectics, can exact of osteopaths examination in subjects unnecessary to their curriculum, and practically make it impossible for any new school of medicine, no matter how important its discoveries, to gain a foothold.

Should we not, as osteopaths, be on the alert, and work for a separate board in every state, fighting until we succeed?

From my observation of medical schools and the knowledge I have of their conduct, I can candidly say that I believe that you are getting a better education and will be better fitted for your future great responsibilities, than is the average medical man. And, also, I believe from the trend of events, that the A. S. O. will, in a very short time be second to none in the country as an institution of learning for students desirous of becoming physicians. This 1908 class has nothing to fear from the medical man. Just put your education into practical use,—use your own brains, and success must follow.

Relative to the activities of the medical men, let me read you a few articles that throw some light on what they are doing:

"According to statements made by prominent physicians, at a meeting of the Council on Medical Education of the American Medical Association, four thousand men and women graduate from the medical colleges of the United States each year, of whom three thousand are unfitted to practice medicine, and, according to the statement of members of examining boards, some are too illiterate to understand medicine."

To quote from the "Chicago Tribune" of April 30, 1907.

"There are on the average, 4000 doctors graduated every year by the medical colleges of the country, and about three-fourths of these are utterly incompetent and should never be permitted to practice medicine. Certain medical colleges are lacking in proper equipment, the instructors are wanting in the necessary ability for their task, and their examination methods are useless.

"These startling statements were made yesterday at a meeting of the Council on Medical Education of the American Medical Association, a council composed of members of the various state boards of medical examiners and delegates from the State Medical Societies."

The evil of incompetent doctors turned out by inadequate schools, said Dr. Chester Mayer, member of the State Board of examiners of Kentucky strikes down to the roots of the educational system. Primary education oftentimes is a farce. I have taught students for years knowing only too well that they, for the most part, did not understand what I was saying because of the defects in their primary education. Yet these men will be coached for examinations and will pass them while they are almost entirely ignorant of the subjects in which they are examined.

"Statements even more ominous in their import were made by Dr. W. T. Means, chairman of the judicial council of the Association of American Medical Colleges. Dr. Means supported his statements with statistics revealing an extraordinary condition in the methods by which men are authorized with power over life."

"Some men qualified as medical practitioners," says Dr. Means, "are deficient in knowledge of bacteriology, chemistry, physiology and anatomy. I doubt if some could make a laboratory test for typhoid fever. I have written to twenty-five state boards, and I find that 58 per cent of the men who fail at their final examination, pass on a second examination, a few weeks after. In the days intervening, where did they get their knowledge? They did not get it. They were simply crammed with the answers of those questions which it was expected they would be asked, and they answered as parrots, not knowing what they were saying.

Further, "Dr. Henry Beates, Jr., President of the Board of Medical Examiners for Pennsylvania, is quoted in the public press as saying (after having examined a number of papers submitted by candidates for license) that:

"The failure of twenty-three per cent of the doctors who took the examination for licensure this month, (December, 1906), before the state board of medical examiners proves the crying necessity for an investigation of the actual manner in which the medical college is doing its work. About one-quarter of the papers show a degree of illiteracy that renders the candidates for licensure incapable of understanding medicine."

* * *

Join the societies of your neighborhood. Organization does good, both to the profession, and to individuals. A good society is almost equal to a post-graduate course. Nowhere else can you study the individuality and personality of different physicians, and learn the secrets of each one's success or failure so fully as at the meetings of the society.

There, the specialist, the teacher, and the general practitioner, all meet, and each in his own way, contributes to the instruction and intellectual recreation of the others. There, you can meet your neighbors on common ground, and compare experience and opinion in open discussion. There, you can measure the height and depth of your contemporaries, and see the difference between the judicious and the injudicious; between intellectual giants and dwarfs; and in many other respects, learn effectually to separate chaff from wheat.

Keep up your studies, or the knowledge which you have already acquired will rapidly become misty, and slip away from you. Without study, the details of cases and the symptoms of many diseases wear out of one's memory after two or three years have elapsed. Try to get together a library of useful books, as soon as you can, after graduating. Money spent in this way will return a hundred fold. Subscribe to as many good journals as you can afford to pay for, and read and digest them carefully, so as to keep abreast of the times, they are necessary to the progressive osteopath.

Never publish weak or trifling articles, as whatever one writes, is supposed to be a mirror of his own mind. Do not, however, hesitate to write whenever you have anything valuable, or instructive to offer, either for the benefit of others, or to increase your own standing and reputation. Base your articles on facts, or on an analysis of facts, rather than upon speculation and theory. I have come in contact personally with every one of the Atlas members, have recited with you in classes, have seen you meet patients, have noted your methods of diagnosing, and have concluded that you are bound to succeed. I think this, because I know you are determined to attain and retain what the A. S. O. can give you.

Do not think for a moment, that all you have to do after graduating is to sit in your office and that patients will flock to you by the hundreds. Not so,—some of you, no doubt, will wait one, two, or three months for the first patient. The time will depend a great deal upon your location, and the amount of push you possess and put into the business. When that first patient comes, do your best to correctly diagnose his disorder, then do your best to correct it. Compel yourself to work faithfully, and develop the faculty of observation, and every year will make you a better osteopath. And by the time you have worked, and observed for a few years, you will be clinically familiar with all the more common ailments, that will confront you. And you will know from experience, how to avoid errors, and how to shape your diagnosis, prognosis, and treatments, far better than you did in the beginning. Beware not to

fall into the rut of the ordinary medical physician who has about six cardinal points to follow, viz., to feel the pulse, to examine the tongue, to inquire about the appetite, the sleep, the bowels; and then give a cathartic or some quinine. I do not believe one of you here will ever be so negligent and careless. Again, I say, develop the faculty of observation.

Keep a precise record of every case, as to what you find, your diagnosis, and treatment. It will be of inestimable value to you in future years.

You will find, sooner or later, that your welfare depends upon how much money you collect, and not upon how much you book, so insist upon the payment of your fees. If you have a rule, and people know it, they will associate you and your rule together. Let the public know what your system is in the early years of your practice, or you can not do so afterwards. When a patient asks how much your bill is, always answer promptly and decidedly, and take the fees when tendered you. Be sure and never undercharge for your services, for it is ruinous to your interests, and to the interests of the profession. I will be glad when we can demand a special fee, for certain cases, not for the work, but for knowing how to do it, as many established medical men do. Frequently, patients will come to you, who have been to every specialist they could hear of, without receiving benefit, and who have paid out thousands of dollars. Now very often, you will be able to benefit, and in some cases, make a cure in two or three treatments. And lo, you get your two or three dollars per treatment, according to your charges. In justice you should receive a good fee, say, one or two hundred dollars, instead of five or ten dollars.

Never agree to attend any one for a "contingent fee," that is, do not take patients with chronic disorders on the "no cure, no pay" plan, or to pay "If their expectations are realized." Make no such agreement, for they are never satisfactory, and will generally end in your being swindled or possibly charged with malpractice. Remember that you charge for services, not for results, and must be paid for your services even though the patient die, and that all who employ you must take the probabilities of cure or relief. Of course, after the education you are receiving here in pathology, etc., you will be able to tell about what promises you should make, but be guarded, as things might not turn out as you expect or plan. In those hopeless cases, such as cancer, phthisis (in the last stages), you had better acknowledge that you can do but little, and act according to the wish of the patient.

The most unsatisfactory and troublesome kind of patient you will

meet are the unprincipled tricksters who cheat everybody who gives them a chance, and consider it no wrong to swindle an osteopath. You will be fortunate if you have tact enough to escape having anything to do with this class.

Improve every opportunity you have here, you will need all of your knowledge after you graduate. Then, you are in the world to fail or succeed by your own efforts. The responsibility, when death stares you in the face, is awful. So I say again, improve your opportunities while you are at the A. S. O. Retain all you can, and what you have not time to learn, know the book and page where it may be found. Use the brain God has given you. Get it working in the right channels, and remember that you are just as much a factor, as any other man. Acquire the habit of independent thinking, and day by day, responsibilities will seem lighter and be better discharged.

Do not make a point of discovering the disagreeable in everything. It may give you a comforting sense of being a fine critic; but oh, how it wearies those who must listen to your carping. Make a specialty of hunting the good,—it is always to be found somewhere, in everything, and in everybody. If you fail to discover anything but the bad, talk about something else. Do not be argumentative. Be natural, refined, and intelligent.

Adaptability is a Heaven-sent gift, and is normal to your whole anatomy. Did you ever think about your face, and what an important part it plays in your relation towards the remainder of the world? So far as you are concerned, the world is just what it appears to be. Let morning find you in a sour mood, and the world will be sour, too. Show your acidity at the breakfast table, and precious few loving smiles will respond. Even your food will resent your disposition, towards things in general, and you will not enjoy your breakfast. Going to your work, even the trees and flowers and grass will reflect back upon you, the state of your own mind. Yet, there is nothing the matter with the food, the flowers, and the trees, or the whole face of nature; all are normal and good. Smile at the world, and it will smile back at you. The attitude of other people toward you is mostly governed by your attitude toward them,—you get what you give.

If you have a sour disposition, it will show in your face, and people will turn away from you. The world does not look for the man who carries his troubles around with him, any more than it is looking for trouble. The world shuns him, or returns scowl for scowl. Usually, we are either attracted, or repulsed by the facial expressions of those whom we meet. Some faces, in features and complexion, are beautiful,

but contain traces of a disposition whose meanness mars all their beauty. Again, features may be positively ugly, yet so touched, with the light of a sweet, kind, and loving disposition, that we forget the features, while the eye as it were, focuses straight into the soul, to enjoy the recognition and contemplation of a beauty real and forever enduring.

Have you ever noticed how the sweet innocent baby will go to some people at once, and to others, never, no matter how much they are coaxed and coddled? Babies are looking for love, and they can generally detect its presence or absence by looking at the face. It is the readable indicator of the depths of the mind. An unlovely disposition and a lovely face are incompatible. The face will finally tell the story. These things must be remembered, if you would have complete success.

There were never greater opportunities to further the advancement of Osteopathy than there are at the present time. So, let us join hands and let us work as a unit for everything that stands for pure, unadulterated Osteopathy.

In concluding, I cannot find words more appropriate than a few lines written by Mrs. Alla Hoyt Brown:

The Man Under the Hat.

Bravely strike a new path for yourself—
Don't follow the trails of the past;
You will find it not only brings pelf,
But it gives you a name that will last.

* * *

Never mind what your grandfather did—
Though he may have done wrong or done right;
On the chest of the past, close the lid,
For the present is all that's in sight.

* * *

You need answer for no one at all
Save the man that is under your hat;
See that he from esteem does not fall,
But for that which seems right stands pat.

* * *

Let the future take care of itself;
It will surely bring good things to you,
If you keep the dark past on the shelf,
And to the bright present, live true.

THE BULLETIN

OF THE ATLAS AND AXIS CLUBS.

GRANVILLE B. WALLER, Editor.

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MISS FRANCES PEARLE SAUNDERS, Reporter for Axis Club.

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KIRKSVILLE, MISSOURI, MARCH 1908.

EDITORIALS.

Wearing of the Badge. One of our local members gave us an article on the wearing of badges and the most of it we quote as follows: "Our influence as an organization is, I believe, much lessened by the fact that so many—perhaps a majority of our members in school, do not wear the emblem of the club where it may be seen, if indeed, they wear it at all. We are perhaps content in the knowledge that the Atlas is the best, and strongest club in the school. But what of that? We can make it still stronger and better. We have not all of the good men of the school."

"If each member would wear his pin conspicuously, it would show those men who were deliberating upon the club features of the school, which organization was undoubtedly the strongest—numerically and mentally."

Perhaps there is more in this sentiment than some of us might think. Surely the club does not stand for anything superficial or showy. And surely, again, membership in the club is not a matter to be ashamed of. Yet, we do not think that all the modesty of "good breeding" can completely account for the fact that many of us do not appear to wear the pin at all. If we are ashamed of what the pin means

—viz., the club—that is UNFORTUNATE. If we are ashamed of the emblems themselves—perhaps we had better have them made smaller. If neither of these feelings exists, then let us wear the pin, unashamed to stand for what it means and unafraid in this way to dare, before the public, the fulfilment in ourselves of that aggregate of qualities which make of a man a gentleman, a scholar and a physician.

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THE M. D.'s DILEMMA.

"Where Are We Drifting, and What Will be the End, in Regard to Proprietary Medicines?"

Editor Medical World:—Will we continue to use the pharmacopeia and our text-books, or is another era of medicin dawning? A circumstance that happened lately started these thoughts in my head. The Medical World and other journals have had considerable to say lately on this subject, but I had no idea that the prescribing of proprietary medicins was so prevalent. About one year ago I was called to a neighboring county to see a very bad case of skin disease. I found a man 68 years old with a scaly eruption all over his body, every inch of it, with nearly daily shedding of scales from the size of one-eighth of an inch to as large as four or five inches square. He had been like this for several months. He rapidly improved for a time, especially his general condition. Fever abated, appetite improved, strength returned, etc.; and the scaly condition gradually, left, except his feet and legs half way to the knees. This continued to peel, half a pint of scales every two or three days. I urged him to come over so I could try more radical treatment, but circumstances were such that he could not get away from home. A few weeks ago he was going to a neighboring city, and I advised him to see an EMINENT DOCTOR there and have him write to me his views of the case. He did so, and without wishing to cast any aspersions on the doctor, for the sake of illustrating the present trend, I wish to tell of his recommendations. In the first place I would say I have great respect for his ability. He has as good a practise as any doctor in the city. His letterheads state that he is a member of the State Board of Medical Examiners, so his opinion should have weight. Well, he advised, first, pineoleum ointment spread on cloth, after washing with Lloyd's asepsin soap, osteopathic manipulations of the leg (instructions copied from "OSTEOPATHY COMPLETE," altho I cannot see that it is in any way different from works on Swedish movements or massage). Internal medication: "thialion" and "nephretin tablets;" then biochemic tablets of calcarea phos., 3X, and calcarea fluoride 3X.

Now just imagin a candidate giving such a treatment before a board of medical examiners. Would it pass? and if not, would the examiner wish one kind of answer and another kind of treatment? As I was somewhat rusty in the latest treatment, as given in the latest standard advs., I lookt it up and found that the manufacturers recommend the ointment in eczema (presumably acute and chronic), itch, and piles. I remember a long time ago a good old man in giving me some advice which I highly prized, said: "As you grow older you will use fewer remedies; a few old, well-tried medicins will go a long way if well studied." Now I find that by carefully studying the latest standard advertisements, that about three remedies will cure nearly every diseased condition. I am really surprised to read how easy it is to cure the hardest cases. Now all of these proprietaries are probably good in their place, but the best doctors, or perhaps I should say advertisers and promoters, recommend them for so many things, and in such extravagant terms, that one would be wise to believe not one word of it. I will conclude with an illustration of how the physician's armamentarium is changing. I was recently in one of the most prominent post-graduate colleges in the country. Attending a gynecological clinic, the teacher was showing a case of menorrhagia. Turning to the class he said, "What is our best medicin for this condition?" Half the class immediately replied, "stypticin." This was perhaps true, but when I askt for information as to what it was, no one could tell me beyond the fact that it was a medicin put out by one of the standard houses; in fact, one of the foremost and leading makers and teachers of medicin to-day.

In the case of skin disease recited above, was it because this doctor had by experience found that these manufacturers could put out a better remedy for a large variety of skin troubles than could the leading dermatologists of the country prescribing for one definit condition? or had the clever manufacturers (or clever advertisers) used more glowing and seductiv language in describing the therapeutics of their loved and honored and valuable and profit-making product than did Shoemaker, Hyde, Bulkley, Crocker, Kaposi, Stellwagon, etc., in describing the virtues of tar, sulfur, zine oxid, etc.?

If it would be of interest, I would also give you the other details of treatment that the doctor gave me. It would show that it was good treatment all the way thru. I would not wish to imply that his treatment was not the very best. I did not give his treatment for the purpose of criticism, only in the matter of prescribing ready-made prescriptions and prescriptions that are boosted as having polytherapeutic virtues.—World Admirer.

The above is a letter copied, phonetic spelling and all, from a medical contemporary. It is interesting and to some degree, consoling to note that ours is not the only one of the two great therapeutic schools; Allopathy,—quantitatively, and statically great,—Osteopathy, qualitatively and kinetically great; which is looking to the future with apprehension.

Then the matter of osteopathic texts! We HAVE A FEW good ones. But the facts that our profession too, has its charlatans, and that publishers will print almost anything that is paid for, constantly threaten us individually with the loss of money and time spent upon worthless volumns, and are a constant damage to the reputation of the profession for allowing such things to be printed and circulated, uncondemned and apparently in its name!

In our freshman year we were a proud possessor of a copy of, "Osteopathy Complete." We must claim that in the very beginning the title did not appeal to us. OSTEOPATHY, THAT MUST COMPREHEND EVERY KNOWN FACT OF MEDICAL SCIENCE IN ALL ITS VARIED BRANCHES CONDENSED TO A VOLUMN OF SOME 300 PAGES!! Let us say that we read a few pages of this ambitious (?) work and then arranged to exchange it.

The Roman Church has its "Index Expurgatorius," why cannot we? A definite, and courageous stand upon the matter of literature would save some of our students some false steps—and their future patients, some unskilful and meaningless wrenches. The faculties of our schools cannot perhaps do this one whit better than they are doing, but state societies and the A. O. A. could speak with a voice that would be heard.

Let us not cease to long for and, as close students and observant practitioners, WORK FOR AN "Osteopathic Literature." But at the same time let us keep in mind this saying nearly 3000 years old,—“Of the making of many books there is no end,” and for the good of ourselves and the profession discriminate sharply twixt literature and trash.

Dr. Greenwood's Visit. Dr. V. H. Greenwood, the newly appointed president of the Missouri State Board, has just concluded a two weeks' visit of inspection to the A. S. O. In a short address to the students just before his leaving, he said that in visiting our different classes, it had taken him some time to get his bearings—so great had been the provement in the school during recent years.

To the Program Committee.

As a matter affecting the welfare of the Club in so far as it may be

affected by the lectures held in our hall on program evenings, we wish to call grateful attention to the efficient work of our program committee.

* * *

The Late Missouri State Board Examination. Following the opinion of an attorney to the effect that such a thing would hold legally, Mr. C. E. Boxx, a special examiner for the board conducted the ordeal for about 200 of our undergraduates. It was understood that if they passed their finals and graduated, state licenses would then be issued to those who had passed the State Board. The attorney general has decided this examination to be illegal and he has promised to re-examine the same students after their graduation.

* * *

The Post-Graduate College. We reprint here an editorial from the "Journal of Osteopathy." All necessary comment from us inheres in our printing it. To those who see the "Journal" it should not be bad repetition, for those who do not, it is published here for wider circulation.

"At Put-in-Bay, the editor listened to the talk about a post-graduate college, and gained this idea of the plan:

Research work to be properly done, must be assigned to one who is both a deep student and a successful practitioner. Of these, there are but few in the profession, and they are otherwise employed. The college professor must earn his salary, the busy practitioner must take care of his practice. In order to provide adequate recompense for these, both of which would require a large amount of money to balance the loss of income, it was agreed that the A. O. A. should take up the financial part of the work. The A. O. A., then, was to raise a fund, the interest from which was to be used to defray the expense of the practitioner selected and also to provide an adequate recompense for his time, as such research would of necessity cause his retirement from active practice.

With this idea he talked to different practitioners in favor of the plan, helped to secure subscriptions, and himself subscribed, and later wrote to different publications, advocating the idea. Now behold, the idea has suddenly changed from that of providing the support of practitioner who was to work with the laboratories already in existence at the various schools and give his results to the profession, to the purchasing an entirely new plant of laboratories at large expense, and the maintaining them at still further expense, in order that some few of the practitioners may do the work they already can do as well, and perhaps better, in the colleges already existing. Where the plan changed

does not seem apparent, but to one practitioner in particular it looks like the only possible result would be to tie up money in useless extra equipment and to cripple the colleges which have made the profession what it is, and which have had at best, a none too roseate existence."

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ATLAS NOTES.

On the evening of February 22, the club was at ease for the enjoyment of quite a profitable program whose numbers were:—

Whistling Solo.....	Millard J. Grieves
Address.....	Dr. William Smith
Song.....	Atlas Quartette
Vocal Solo.....	Charles P. Hanson

The following report of Dr. Smith's address is placed under a title which we certainly should not have used had it not been at his own suggestion.

Some Rambling Thoughts on Diet.

It is upon the matter of diet, that I wish to speak to you this evening. This is of the utmost importance, for unless the patient is fed properly, he will not progress as he should. And unless elimination, or waste be effected, he would be poisoned by his very food.

The complete course of digestion might be divided into four processes; mastication, digestion, absorption, and elimination. There are chemical processes going on, first in the mouth, next in the stomach, lastly in the small intestine. In the colon, it ceases. The processes of digestion are very complex. As I said, we have three digestive areas; the mouth, stomach, and small intestines. We can not exercise the sense of taste unless we have the food in a condition of solution. We have the sense of taste and smell, and these are closely connected. If we take an onion, and eat it while holding the nose, there is no taste to it whatever; release the nose, and the onion flavor is strong. Flavor is a combination of taste and smell. In the mouth, we have the action on carbohydrates by the saliva, which contains the ferment, ptyalin. Passing thence into the stomach, the food comes into contact with another secretion, consisting largely of pepsin, which acts on proteids, only in the presence of an acid medium, so the food is first acidified in the stomach, by hydrochloric acid there secreted. Very shortly after the swallowing of the mass, digestion of starches, ceases, because the alkalinity requisite is neutralized by the acid of the stomach. It is said that meats might be swallowed without any chewing, and they would digest as well, or better than if thoroughly chewed, while carbohydrates should be thoroughly masticated, and we can see why; because meats are not acted upon in

the mouth, while carbohydrates are. We have escape of the food after it has reached a semi-liquid state, through the pyloric valve into the duodenum, where it meets the pancreatic secretion and the bile. The pancreatic secretion contains ferments which act upon all three of the food elements; tripsin acts upon the proteids; amyllopsin acts upon the starchy foods, similarly to ptylin; steapsin acts upon fats. The bile is secreted by the liver, and stored in the gall bladder. You must remember that the liver is secreting bile all the time, but that it flows into the duodenum only when food is there to be digested, while, all the rest of the time, it is being stored up in the gall bladder ready for use when needed. Only when food passes along the duodenum, does the bile flow, but the liver is constantly secreting. So we find here, in this part of the process of digestion, employment of the secretion of the pancreas, and also of the liver secretion. We know that the bile helps in the digestion of fats, and in absorption, and it is also believed that it is an antiseptic, preventing putrefaction. Succus entericus is an intestinal juice about which little is known, but here, we have had the means of digestion of all kinds of foods. We know what the beginning of the processes are, we know the result, and the end, but we do not know the different steps in between. It is known, that if meat were broken up into the smallest fragments, and put into the blood stream, it would prove disastrous. But we do not know the first thing about physiological chemistry. We know that we have this mass in the stomach undergoing change, and have proteids changing to peptones, and taken up by the veins, and brought by the portal vein to the liver, and then through the heart. During life, the liver does not contain sugar, but the dead liver does. We do not know why.

Let us see what processes we have in the way of elimination. The gas CO₂ is given off by the way of the lungs, having been carried to them by the blood from the right heart. Then we have the excretion of the kidneys and intestines, and we have elimination by way of the skin. As the mass passes into the colon, digestion ceases, but absorption continues. As we go down the intestine, we find less and less matter that can be absorbed. Passing through the intestine, it becomes dryer and dryer until, when it reaches the rectum, nothing is left but waste, part of which is matter simply in excess of the requirements of the body, part of which is harmful, or unfit for use. We find that the process of absorption almost ceases, when the rectum is reached. So, digestion begins at the mouth, and ends at the ileocolic valve, and absorption continues to the anus.

Every portion of the alimentary canal requires rest, just as every

part of the body requires rest. We find that the digestive apparatus does not work all the time. Digestion in the stomach and intestines occurs only when food is present. Each portion of the alimentary canal gets its regular period of rest which is absolutely essential. We see people chewing gum after meals to aid digestion. How in the world is this going to help digestion? The act of mastication secretes saliva, which hinders gastric digestion, because, as we have seen, saliva is alkaline, and the contents of the stomach must be acid, before digestion can take place. We all know that in digestion we sometimes meet with interference. Dyspepsia might be classed in two groups; that caused by impaired secretion, and that caused from impaired motion. If we have the mass of food put into the stomach, and the gastric motion is insufficient, we will not have proper mixing, so we will have impaired digestion. In the same way, if we retard unduly, the passage of the mass through the small intestine, we over dry the contents, and produce constipation. Excessive dryness of the intestinal contents, or insufficient motion will cause constipation. This dyspepsia may be of different types; it may be due to the stomach, caused either by impaired motion, or secretion, or, it may be in the intestine from the same causes. It may be retention of matter in the colon, which delay may cause absorption into the body of poisonous products.

When you meet with a case of dyspepsia, (and I am going to tell you what I know), you will find out a great deal by asking your patients questions. Don't govern yourself by fixed rules. A story is told of a doctor who gave his patient certain set-down rules regarding diet, and one was, that he should smoke only two cigars after each meal. The patient started to speak, but the doctor hushed him up, telling him he must keep these rules. When the doctor made his next visit, the patient was looking very poorly, and the doctor asked him if he had kept the rules. The patient said yes. "Well, what is the matter with you then?" asked the doctor. "Well," said the patient, "Its those — cigars. I never tried to smoke before!"

So, don't have any set-down rules for your patients. You must not assume that because a man likes a thing, it is good or bad for him. I never saw a consumptive who would eat fat willingly. Ask any tuberculous patients if there is anything they cannot eat, and they will say "No." Then ask them if they can eat fat, and they will say, "No, I do not like it." That one thing, they ought to eat. Fat is a great salvation to tuberculous patients.

The great cause of dyspepsia is over-work. When you make inquiries of a patient with dyspepsia, inquire about the articles of diet

which seem to agree with him: Whether fat or lean meat agrees with him, and whether potatoes agree with him or not. In that way, you can tell whether it is intestinal dyspepsia or gastric dyspepsia. If fats and starches disagree, while lean meat and eggs do not,—you have your hint. Do not stir up the intestines by stimulating the liver. There are two ways of making a horse work, when he is tired. One is the whip, the other is rest. How are you going to rest the intestines in intestinal dyspepsia? You can give such foods as will be digested in the stomach. You can give such nitrogenous diet as will be digested by the pepsin of the stomach, and will produce the minimum of waste. Your patient tells you that meats cause him distress. There are two kinds of distress, organic, and functional. Functional distress is eased by taking food into the stomach, and comes on when the stomach is empty or distended with flatus. Organic distress is aggravated by the presence of food. Suppose when food is taken into the stomach, it soon causes pain. This is an indication that there is interference with gastric digestion, and we want to give that man food that will be digested in the intestines; not a mass of food that will pass into the stomach, and there remain as an irritating, undigested mass. Milk in the stomach might undergo coagulation, and become more indigestible than beefsteak. This curd stays there, causes distress, and forms gas, and the patient is worse than before. We want something that will pass from the stomach into the small intestine. Milk mixed with lime water is good. The alkaline food neutralizes the hydrochloric acid, and tends to prevent curdling of the milk.

Suppose now that you have both the stomach and the small intestines so that digestion can not go on in either of them. You can still give the patient food in such amount that he can live for weeks and months, perfectly well. We can get predigested food, and inject it into the colon, using none of the purchased extracts, but making our own meat extract. We can make it, anywhere, and predigest it with either pancreatin, or pepsin. Give this by way of the colon. We can take milk and digest it with pancreatin, and inject it into the colon. We can rest any part of the alimentary canal.

Now, we know that nitrogen waste passes away through the kidney. How the change is accomplished, in the kidney, we do not know. We do know we have two processes through the kidney; one through the tubular portion of the kidney, and one through the glomerular portion. See that the patient has a large amount of liquid to keep the tubules flushed. Rest the kidneys from a nitrogenous diet.

What is good diet in a case of nephritis? I will tell you of one case I had of chronic nephritis. This man was employed in hauling. There

was oedema of both legs, and that, very extreme. A general dropsy of the lower part of the body must be due to a particular cause,—for instance, heart or kidney. An oedema of one leg would be due to a local cause such as an interference with an iliac or femoral vein. I did not know anything about Osteopathy, then, but I did know that drugs were of no use in such cases. I went into Edinburgh, and consulted an old medical friend. I told him that I thought of following out George Keith's idea, and diet my patient to get a cure,—to restrict the diet, to rest the kidneys, and at the same time, keep them flushed. I decided to give him skim milk. For four months, that man never took a bite of solid food; nothing but skim milk. To-day, this man is there hauling, and has never been sick since. I have since then, used that method in dozens of cases. In every case of nephritis, put the patient on a diet of skim milk.

Medical men often ask me how Osteopathy can treat this and that without drugs. Now, I know of no specific drug for measles, scarlet fever, smallpox, etc. In smallpox, no one can do anything but attend to the skin and bowels and kidneys. If you give a patient with scarlet fever, meat, you might just as well cut his throat. Give him skim milk. In all these inflammatory diseases, the patient is living on his own flesh. Osteopathy is nothing but anatomy, physiology, and applied horse sense. Suppose you have a case of hepatic disturbance. What then? Rest the liver. If a man has a sluggish liver, have him go without food for a while. It will not hurt him, for he can abstain two or three weeks. Drugs are not going to do him any good. They only act as a whip. If a man has a sluggish liver, have him rest it. Let him go without food. Give him plenty of water to drink. What is water going to do? Why it will wash out his whole portal system. Give him copious drinks of hot water, because cold water stimulates the stomach to contraction. Give water as hot as possible, and it then favors absorption.

As I told you at first, I am only giving you a few rambling facts. Now I will tell you how to make extract of meat:—

Have the butcher defibrinate some beef blood by whipping immediately on drawing it off. This whipped blood contains all the nitrogenous elements with the exception of the, practically, waste fibrin. Have a strongly flavored water ready, flavored with vegetables, it may be onion, parsnips, turnip, carrot, any strongly flavored vegetable or a combination of them. Take of your defibrinated blood one part and of this prepared water two parts. Put in a double boiler and with water in the outer section gradually raise the temperature to about 100° Fahr. Now add to each twenty ounces of this mixture 10 grains of pancreatin

and 30 grains of bicarbonate of soda, and maintain at that temperature for thirty minutes, stirring occasionally. At the end of thirty minutes raise the temperature gradually, stirring constantly until the blood and added water thicken into a pasty mass of the consistency of mush. Remove from the fire and pass this through a fine hair sieve to remove any fragments of fibrin which may have escaped the twigs used in whipping. The resultant mass will be in appearance much like chocolate paste. This may either be given as it is, diluted with water flavored to form a soup or flavored in various ways. It may be dried out to form a powder and will then keep perfectly if allowed to remain quite dry. In any case, you have a nitrogenous food of the highest nutritive quality, partially predigested and which contains the maximum of nutrition to an amount of waste which might be represented by O. I may mention as a curious fact that in endeavoring to make this meat extract tasteless I tried combinations of every kind of flavors for about three weeks. At last I hit upon one but never went any further with it at the time, or since, so that the exact proportions I cannot give, some one may experiment, however, if he hits on the exact proportions there is a fortune for him, as an absolutely tasteless preparation of predigested blood would be an ideal article of diet in a multitude of cases. Every case of exhaustion where feeding and rest at the same time are indicated requires just such food. Expressed juice of onion and oil of cloves produce with cooked blood such a combination of flavors that one exactly neutralizes the other, the resultant is as tasteless as milk and has absolutely no odor. The only thing is the proportion of these agents, as I have said that requires some experimentation. I have used this meat extract in dozens of cases, used it regularly in my practice in Scotland for over two years, and found it of such value that I kept it always on hand and gave it to patients without any charge. As those days were prior to my experiments on the producing of an extract without taste, the friends had to mix the prepared paste as I gave it to them with strongly flavored vegetable water, herbs and so forth to hide the nauseous taste and odor.

One thing more in regard to diet. Remember that the human body is, while in health constantly forming within itself alcohol. In many abnormal conditions we find the necessity for this stimulation which is now absent. Alcohol exists in the body in nature, in health, is requisite for health, and where its absence from the bodily economy renders vitality low, it should be given as a food, not as a medicine. Nature has supplied it, has put in our bodies the means for its production, if it be absent through some interference with natural conditions it must be supplied artificially. To any who object to this idea and hold

up their hands in real or simulated horror and speak with disgust of the "very idea" let me point out a passage in the Acts of the Apostles where Peter saw the vision of the sheet, and when he spoke of animals as, "unclean," was told, "Call not that which God hath created common or unclean." What was good enough for the Almighty to place within the means of the body of each one of us to make for itself, looks to me as though it might be given to a patient when some deviation from the bodily structure as modelled by the Deity has interfered with the performance of its functions as specially devised by Him.

* * *

NATIONAL ORGANIZATION.

(We had rather expected a larger number of yeas and nays to this proposition than have been received to date, but believing it to be a matter that may be suddenly sprung upon us for decision at the last moment, we think it important to have the discussion continued, according to our promise in the last issue.—Ed.)

THE FORMATION OF A NATIONAL CHAPTER.

In view of the very evident misunderstanding of my position regarding national organization as expressed in the comments published in the February Bulletin, it seems wise to me to express my ideas in the matter more fully so that valuable time need not be wasted in useless discussion. In the first place to dispose of the objections already expressed, I will say that I did not contemplate extending the Atlas Club to other schools. I doubt if the sentiment of the field members has changed much regarding that point since those who attended the Club's alumni meeting at the St. Louis meeting of the A. O. A. expressed themselves so strongly opposed to such an extension. So we will leave that point out of the discussion just now.

What I did have in mind was that there is a most lamentable lack of co-operation between the Club and many of its graduate members and that the Kirksville meeting of the A. O. A. presented an ideal opportunity for the active membership to get in touch with the graduate member's ideas for the causes thereof and in accordance with those ideas to take steps if possible at that time, to remedy that condition. The remedy, in my estimation, being the formation of a National Chapter among its alumni members and the delegating of sufficient authority to it as would allow them to, in an advisory capacity, regulate, if not control, all matters of the Club that affects them particularly,—especially those over which complaint has arisen in the past. I have no hesitancy in saying that, at the present time, the Club is not getting the benefit it should from the great strength of its field members and that

it should seize this opportunity as a means for arousing and retaining the active interest and enthusiasm in its work of all of those members. The Club can well afford to broaden the scope of its organization and as fully as possible recognize the just rights of its graduate members. It has, in a measure, overlooked this too long and lost many who will be hard to reclaim. Besides the actual loss of so many members in the past I would suggest that the continued existence of many of the causes for their loss is a sufficient reason for the formation of such an organization that future loss may be avoided. We should have a National Chapter whose officers would have power to call and arrange for meetings of the field members and delegates of the active chapter at the A. O. A. meetings, for the consideration of such business as might come before it. As a starter I would suggest that that business should consist in working out the details and arrangements for such meetings and for banquets in connection; the consideration of all matters that would tend to draw the field members together and promote the national and the active chapter's working to the best interests of each other; the election of all members from the field preliminary to their final election and acceptance by the active chapter, the initiation of all such field candidates (at least all those that could not go to Kirksville for initiation), and action in an advisory capacity on applications for alumni chapters or any other business referred to it by the active chapter. No doubt there are many other items that could be included that would add to the advisability for forming such a chapter and to its effectiveness. They will come out as others discuss this matter. All that I have mentioned are advisable either because of their very apparent value or because they have been the cause of dissention and dissatisfaction in the past.

My first published communication regarding this matter brought up besides the question of a national chapter the question of the advisability of forming alumni chapters. I have a few words to say regarding that now. I secured the signatures of the ten alumni members residing around San Francisco Bay at that time to a petition for an alumni chapter and took the petition to the Denver meeting of the A. O. A. in hope that we could secure the approval of our plan by the field members in attendance before presenting it to the Club. We waited for some representative of the Club to call a meeting, but when no such call was made Dr. E. Sisson, one of the petitioners, called a meeting for the following morning as we were very anxious to have our petition attended to. About five persons attended the meeting and of course nothing was done. I took the petition home with me and as soon as the school was in session I sent it on to the Club. No acknowledgment

of its receipt was received and I never succeeded in finding out what had happened to it until I went back to Kirksville last year. It was filed away and nothing would have been done further regarding it if I had not called it up again. A committee of three active members was appointed to consult with the P. G. members then in attendance, to consider the advisability of forming such clubs and to report. That committee, I believe, reported in favor of forming alumni clubs, but added that apparently the charter of the Club made no provision for such action. As it was late in the year nothing further was done. I had hoped that the Club had so awakened to its great opportunity that something might have been done since I left, looking towards having the charter so changed as to allow the formation of alumni clubs and a national chapter as well. If nothing has been done the Club should, in my estimation, decide soon as to whether it is willing to advance or consider any plan regarding a national chapter and alumni chapters or other plans looking toward establishing better relations with its field membership, and if it should decide that such action is advisable, it should begin now to get matters in such shape that they can be presented and acted upon with the least delay when all of our brothers come home in August.

Now is the accepted time. Never again will the Club have such an opportunity for transacting its own business with its field members, so many of them being present.

FROM DR. WM. HORACE IVIE.

The only other communication we have upon this subject is from Dr. A. G. Hildreth,—“Success to the Club and do not form too many alumni chapters.”

* * *

March 14, being set aside for a social meeting the Club was afforded a pleasant evening by the following program:

Instrumental Solo	F. M. Turner
Vocal Solo	R. H. Prindle
Address	Dr. Norman L. Sage
Vocal Solo	Allen Z. Prescott
The address of Dr. Sage appears in the first part of this issue.	

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OUR LATE INITIATES:

Francis G. Cluett, D. O., of Sioux City, Iowa, prior to his studying Osteopathy was engaged in the newspaper business. Dr. Cluett was graduated in the '98 class from the A. S. O., and is at present taking the post graduate work. His wife, Dr. Therese Cluett is a practicing osteopath in Sioux City.

Floyd Henry Weidlein, of the freshman class, comes from Wellman, Iowa. He is a high school graduate and his former occupation was that of a farmer. His interest in our science began with observations of the results it wrought.

* * *

Jerome E. Derek, became interested in Osteopathy through the effects of treatment in his own family and through the acquaintance of an osteopath. Brother Derek was a former resident of Ft. Wayne, Ind. He has a teacher's certificate and is a member of the Junior class.

* * *

Frederick Blair Fleming of Solomon, Kansas, is a member of the Senior class. He is a high school graduate, attended Park College for one year and also took a short course in the Kansas State Normal at Emporia. Practical experience, personally and in the cases of members of his family led to his studying for our profession.

* * *

ATLAS FIELD NOTES.

Dr. Stranleigh R. Meaker, Auburn, N. Y.: "I have had it in mind ever since I graduated and began to receive a yearly bill for dues to the Atlas Club, that some arrangement should be made to relieve field members of the necessity of paying yearly dues. I would suggest that a certificate of Life Membership be granted upon the payment of a stated sum. There are many arguments for and against the idea which might be brought out in reference to an inquiry published in the Bulletin. Then, if sufficient interest were shown, the subject, together with the correspondence concerning it might be brought before the general meeting of the Club to be held in Kirksville next summer."

* * *

Dr. C. J. Gaddis, Oakland, Calif.: "Have watched the Club's progress with much interest, the Bulletin is keeping its record. Atlas men are in the lead on the coast, and why should 'nt they be? * * * Have had a busy year."

* * *

Dr. J. H. Robuek, Anadarko, Okla.: "My regards to all the boys. Am glad to see you getting so much practical work. Let no one leave Kirksville till he can find a bony lesion. And remember you are going to have acute cases when you get into active practice."

* * *

Dr. G. E. Thompson, Elmwood, Ill.: "Am glad to see the Club progressing and to learn of the good material it is taking in. Regards to all the Atlas Brothers."

Dr. J. W. Elliott, Cordele, Ga.: "Osteopathy is all right in Georgia. I am looking forward to next August with a great deal of pleasure, when I hope to meet you all again."

* * *

Dr. F. E. Moore, La Grande, Ore.: " * * * Mrs. Moore and myself get much profit and pleasure out of the "Monthly Bulletin." I am sure that the Club is having a most profitable year, and hope that the local chapter will be well represented at the A. O. A. meeting in August. Hundreds of the field members will be present at the convention and will take much interest in the work of the local chapter. With every good wish."

* * *

Dr. John H. Lee, Billings, Mont.: "I am always glad to hear from the Club through the "Bulletin." Dr. Gerdine's article in the February number is worth all the expenses of a life membership in the Club. * * * Best wishes to all of its members."

* * *

Dr. A. H. Dillabough, New York City.: " * * * The Bulletin is great and I look forward to its coming with much pleasure as it makes me think of old days. With my best wishes to all the boys and success to the Club."

* * *

Dr. R. B. Johnston, Greenfield, Iowa: "Kindest regards to the boys of the Club. I hope to see you sometime soon."

* * *

Drs. M. E. Clark and S. E. Warner have dissolved partnership, each now having his individual practice. Their offices are both located in the Board of Trade Building, Indianapolis, Ind.

* * *

Dr. R. W. E. Newton, Cambridge, Ill.: "The case reports (in the Bulletin) are good and the lecturers you are now publishing are of untold value to us in the field. I hope to meet all of the boys in the club rooms next August. It will certainly be a grand thing for all of us to get together once more."

* * *

Dr. H. S. Amusen, Logan, Utah. For the doctor, in his absence, his mother writes the following: " * * * his very best wishes for the Club's future success." "He sailed Dec. 6, '07, for the Pacific Isles, and will visit the Hawaii and Fegi Islands. But will spend most of his time in Australia."

Dr. Ambrose B. Floyd, Buffalo, N. Y. From the Island of Jamaica, (a postal). "Cordial Greeting:—From a spot of green where flowers, fruit and sunshine abound. Am having a most delightful time and feeling better every day. Shall be back to my practice in April."

* * *

Dr. Frank L. Goehring, Pittsburg, Pa.: "Regards to all the boys."

* * *

Dr. Elijah Collier, Decatur, Ill.: "The February Bulletin just received, and I have read it with much interest. Dr. Gerdine's address before the Club was excellent. With best wishes for the Club."

* * *

Dr. E. W. Forsee, Loveland, Colo.: "I enclose \$1.00 to put me right with the Club for 1908. Thank you for reminding me. My practice here has been good from the first week I opened my office. Kindly remember me to the Atlas boys. Say to the Club for me that the combination of an Atlas man with the A. T. Still brand of Osteopathy will win anywhere on the map."

* * *

Dr. E. M. Browne, Dixon, Ill.: "May you live long and prosper."

* * *

Dr. L. S. Irwin, Washington, Pa.: "I am living in hope of making many new acquaintances and also of renewing many of the old ones when we all gather in Kirksville in August."

* * *

Dr. Frank Holmes, Grangeville, Idaho: "Doing pioneer work forty or fifty miles from another osteopath may have advantages, but it tends to make one lonesome at times and to bring up memories of the fellowship and mutual helpfulness of the Atlas Club. * * *"

* * *

Dr. Mead R. Cottrell, Paterson, N. J.: "I hope to be at the great reunion next August and to meet many of the old Atlas men at that time."

* * *

Dr. Eugene M. Casey, Binghamton, N. Y.: "I expect during the A. O. A. meeting this summer to be able to visit the rooms and again enjoy the feeling of home which the Atlas Club always gave me. The work done at the Club, the papers and case reports, discussions, etc., have made lasting impressions which have helped me many times. Stimulate discussions at your meetings, as in the field we are forced daily to defend ourselves and to convince doubters—frequently ones who have been well posted or "fixed" by a "pill dispensing" brother."

AXIS NOTES.

At the regular meeting of the Club on March 11, four members of the freshman class were initiated. There followed a short program of instrumental music by Miss Saunders and several readings given by Mrs. Ewing. These numbers, enjoyed by all, were materially added to by an interesting talk from Dr. Mary Walters on the subject of Typhoid Fever.

* * *

A few points of interest concerning our new members:—

Mrs. Zudie Purdom Eubanks, of Kansas City, Mo., has a mother, sister and two brothers-in-law practicing osteopathy. Having known the Old Doctor all her life her interest in osteopathy finally led to her studying for the profession. Mrs. Eubanks was educated at Slater, Mo.

* * *

Miss Maude Loraine Warner comes from Cincinnati, O. She received her education in Cincinnati public schools and Vassar College. Miss Warner became interested in osteopathy from seeing good results obtained by practitioners.

* * *

Miss Lula Hubbard is a resident of Kirksville and was educated at the State Normal. Miss Hubbard has a brother and sister practicing, and having lived here with the opportunity to see and hear what osteopathy can do, she was led to take up the study.

* * *

Mrs. Bessie McIlwaine Moore, of Macomb, Ill., received education in the Western Illinois State Normal and studied vocal and elocution in Gottschalk's Lyric School, Chicago, Ill. She has an uncle, Dr. R. S. Halladay in practice.

* * *

On February 19th the Club was again pleased to listen to an address by Dr. Cluett of the post-graduate class. His subject being "Osteopathy as compared to other non-drug systems of healing." Being too late for publication in the February issue, it appears below.

DR. CLUETT'S ADDRESS.

PRESIDENT AND LADIES OF THE AXIS CLUB:—

I take great pleasure in again addressing you, and while the request was on very short notice, having been asked only yesterday to speak before you, I will endeavor to give you something useful and instructive. In casting about for a subject, I thought of the many other non-drug systems of healing, and what relation, if any, Osteopathy bore to them,

and in the short time at my disposal I will endeavor to point out wherein Osteopathy is superior to all of them, because it contains the fundamental principle, adjustment, which, in our philosophy, means health.

What are the principal non-drug systems extant to-day? Time will permit of but a mere mention of the more important ones, among which is massage. No one can deny that there is some good in massage, but the so-called massage as generally practiced to-day in the United States is not massage at all, but simply a system of rubbing, and bears very little, if any, resemblance to the old-time Swedish massage as advocated by Ling and others. Therefore, as practiced now, it is not an adjustive treatment, like Osteopathy, but simply a method of rubbing and kneading the body to promote circulation.

Another system that has lately been foisted upon the public as a therapeutic measure, while of some importance, is known as Chiropractic, which simply appropriates one of the many principles of Osteopathy, and in a crude and unscientific manner attempts at once to adjust the vertebrae by a quick and violent thrust. Needless to say it is both painful and sometimes dangerous.

Then we have the mental systems of therapeutics, among which is hypnotism. And what is hypnotism? We have two minds, we are told, the objective mind and the subjective mind. The objective controls our waking thoughts and actions. It is the mind of our animal life. It reasons. The subjective mind, it is claimed, controls our system during sleep. It does not reason. In order to obtain control of the subjective mind the objective mind, must be lulled to sleep. This is done in one of two ways, either by the patient's fixing his eyes on some bright object for several minutes, or by means of a series of suggestions given by the hypnotist. When the hypnotist obtains control of the subjective mind by either method, he or she suggests to the patient thoughts of health. This, in brief, is the method of hypnotic therapeutics.

Suggestive therapeutics is somewhat similar, only the operator is not supposed to put the patient under hypnotic control, but by a method of suggestion he impresses thoughts of health upon a diseased mind.

Christian Science, as I understand it from a perusal of Mrs. Eddy's book, "Science and Health," is a system that denies the very existence of disease, claiming it is simply an error of the mind, and the healer calmly and quietly directs the thoughts of the patient, and God sends down from on high the power to heal the human body of its supposed ills. Needless to say, I do not believe God acts through any healer in that way. I have no desire to offend the sensibilities of any one present,

but I do not believe God is in such petty business as to confine his services to any certain class of persons in order to carry out his beneficent will. As a religion it is theoretically beautiful, but I believe the whole operation of Christian Science healing can be explained by Mental Science. Hundreds of people have been cured by Mental Science who did not believe that God sent down the healing power, but who did believe that there was a healing power resident in every human mind, this power being stimulated to activity by some external influence in the form of suggestion or by some other means.

And what can the osteopath gain from all this? Very little, if anything. There is probably not an osteopath, nor any other doctor, for that matter, but what, either consciously or unconsciously, uses suggestion. Can the osteopath, then, use any part of the foregoing systems without weakening his own system of treatment. If he or she attempts to substitute any part of the above systems for his own, he most assuredly weakens his treatment just that much. He must realize that in Osteopathy he has the touchstone to health, the one fundamental principle which overtops every other system, that principle being adjustment.

If there is any good in any other system of healing, let those people who practice that system use it. They all have as perfect a right to their opinion as you have to yours. The true osteopath, however, cannot afford to mix any other system or practice with his own. Osteopathy is sufficient for all his needs. Stick to it first, last and all the time, and let your Osteopathy be of the adjustive brand as taught at Kirksville by Dr. A. T. Still. If you will stick to that brand of Osteopathy, you need never fear for the results of your work, either professionally or financially.

Miss Genos Sanborn has been quite ill for the past week.

On Wednesday, March 18th, after the regular business meeting, Dr. Pratt addressed the Club and a few invited guests were present. Taking as his subject, "Diseases of the Eye," much was said that was very instructive, especially to the Senior members.

Among many good points he brought out the necessity for a careful diagnosis. Stating that mere treatment and correction of cervical lesions would not relieve the inflammatory condition caused by a foreign body, as a cinder in the eye—if the cinder were still there. Also what sometimes appeared only a simple conjunctivitis might be a much more serious condition, such as trachomatous conjunctivitis, which is given a

bad prognosis by the medical practitioners. A case was cited however in which there was marked improvement after a few osteopathic treatments.

Cataracts found in individuals past middle life complaining of loss of vision unaccompanied by pain—yield to treatment and often excellent results are obtained.

After the lecture a dainty luncheon was served and a social time enjoyed.

AXIS FIELD NOTES.

"Sincerely yours for Osteopathy and the Club."—Carrie P. Parenteau, (Pres. Grand Chapter.)

Dr. Minerva K. Banker, Kingston, N. Y.: "With best wishes for the Club's prosperity."

Dr. Augusta Nichols, Washington, D. C.: "Enclosed find \$2.00 for my dues for year 1908. I receive the Bulletin regularly and enjoy it so much—it is improving all the time. Am glad the Club is doing such good work. Kind regards to all the members."

Dr. Myrtle P. Morrison, Emporia, Kan., writes: "This month I have a birthday—I'm just three years old,—which reminds me of my obligation.

Enclosed find P. O. order for two dollars (\$2.00) my dues for the year. I always read the Bulletin with great pleasure and wish many times I could again enjoy a meeting of our Axis Club.

Yours for the A. S. O. Osteopathy and A. S. O. Axis Club."

Dr. Julia M. Sarratt, Waco, Texas: "What a pleasure to be a member of the Axis Club and to be able to send you yearly dues (\$2.00), for I just could not get along without the Bulletin.

I always wish I could step in on Wednesday afternoons to the meetings, for some of my most instructive and happiest hours were spent up there in the dear old club rooms.

With my best wishes to the Club and to you all."

Died—Mrs. M. Jeanette Hubbard, mother of Dr. Nettie H. Bolles, at Olathe, Kansas, on Dec. 30, the fiftieth anniversary of her marriage.

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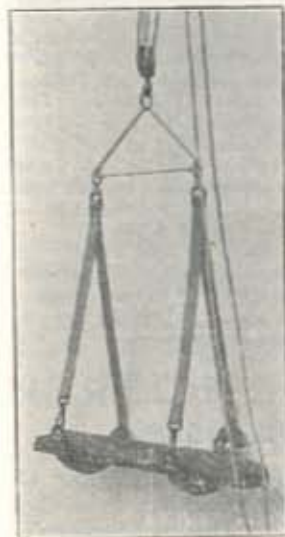
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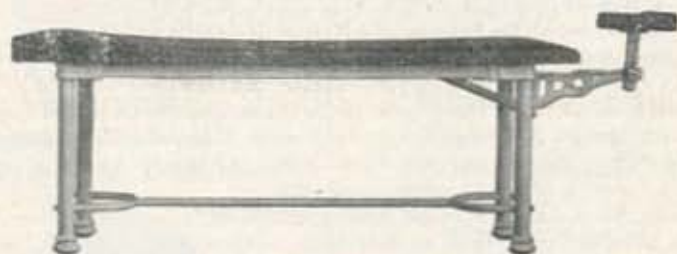
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