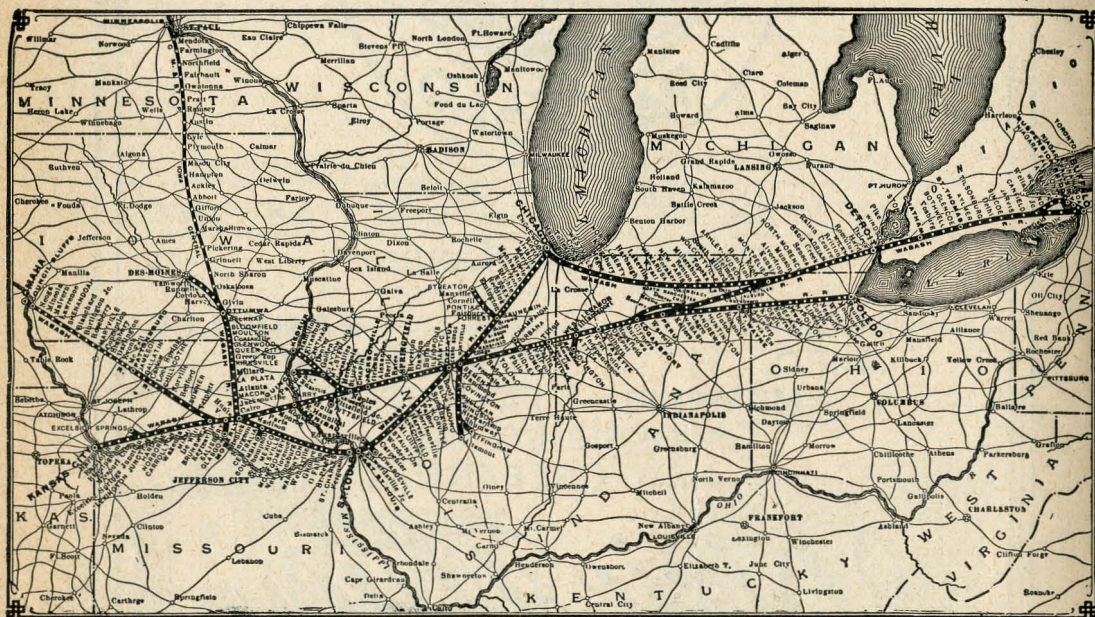


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**THE HEART.**

**T**HE heart is to this system of cures of universal importance, as the first evidence of life and motion is found at the heart, and all bones and softer parts must obtain all matter entering their form and kind. Then it



DR. A. T. STILL.

is only in keeping with reason that to explore the arterial system of blood supply for cause of disease would be to begin the search at the heart. If you stop at the heart, the headquarters of blood supply, you will see a division, or set of arteries going toward the head and arms, and the other going down toward the abdomen and legs, these two divisions comprise all. We know all failures to supply blood will be justly charged to one of these divisions, and we can hopefully hunt for cause of variations, and in proportion to our knowledge of anatomy we will locate the cause of such lesions.

\* \* \*

**OBSTETRICS.**

**H**OW and what to do in all cases of parturition is the query of the young doctor when he has finished his school days. I think a little advice may be acceptable to him. Two objects line up and demand his cool-headed attention. The life of a woman and child are placed in his charge for his safe delivery. How and where he must deliver the two safely are the questions of weight and importance to the man with theory only, and no experience. He begins now to feel that the lack of experimental knowl-



edge is the veil that clouds his sky. I will offer a few words of what I know to be good advice to the beginner in the responsible duties of the doctor at this time. First, keep cool until you think a few moments; there is a large body that has to come out of a freight depot; stop and take another cool breath, ask yourself if there is a door to the depot that is as large as the package that is to be taken out, if so, then when is that package to be rolled out? When he finds the fruit must stay on the tree until ripe and ready to fall off, then is the time to roll the package out; then he has settled the point to be patient till the time for birth has fully come. How may he know when that time has come in the case before him? He must shut his eyes and memory to all bugaboos, bones and deformities that he has seen in books on midwifery that he has grown to almost believe he has to meet every time he is called to attend a case of obstetrics. He should remember that he may meet one bad case of pelvic deformity in one thousand times that he is called to attend. He should study well the use of the forceps and other instruments that he may have to use in delivery in badly deformed women. But he must remember that his hand is far better in ninety-nine cases out of every hundred than any instrument that man has or ever can make. Osteopathy says you must not come bulging in to such places with an arm full of carpenter tools, the sight of which is enough to scare a woman into a spell of paralysis of the womb, and stop all action or power of the whole system to deliver the child by natural expulsion. I think the most foolish thing a doctor can do, is to act so as to cause a woman to feel that she has nothing to do in the delivery of her child, and her only hope to be delivered is to let the doctor pull her child away by brute force. You must teach her that the God of nature had formed her for that purpose, be patient and trust to nature and ninety-nine women in a hundred will have no trouble in the safe delivery of her child. Has not nature formed and given power to her muscles to deliver her? What do we find but wisdom in her formation? We find strong sphincter muscles to hold the womb closed from conception to the hour of birth, then they cease to act as constrictors till the expelling muscles have forced the contents of the womb out to the world. Don't be too anxious to assist nature artificially with your constipation pills, your vaginal douches, and what she should eat when pregnant; if she wants a few apples let her do like Eve of old just shake a tree and eat. Let her alone, she sometimes has more brain than the doctor that has been called in.

Often mothers have what is mistaken by the young doctor for labor pains, such pains often occur two to four weeks before natural labor comes. Remember that to bring on or cause labor prematurely is abortion, and you may by such hasty imprudence cause the death of a healthy woman and child. You cannot use too much caution with your advise and work at such times. This is written for the Osteopathic beginner in obstetrics. I will close by saying that all deformed cases should be advised to go to

some lying in hospital where assistance is plenty, and where they have the best of surgical skill and experience.

\* \* \*

#### OLD THEORIES.

OLD theories give but little if any useful knowledge for our day and generation. They are mostly like a last year's drunk would be to this year's happiness to an Irishman's stomach. They may have been good for old drunks but they are too tedious and tasteful for our boys and girls. I tell you they were old drunks and very poor drunks too. They were watered to death by talk, with no object but to talk old theories, and like peacock tails they look well in the spring of our lives, but they fall out feather at a time, babies pick them up feather at a time but lose them just as fast, even babies know they are too long, that is American born babies. Why should we bother with the dead theories? Why call the student's mind from his study? Hasn't he got the bones in his hands? Let him look, reason and adjust till he finds he wants help, then do so if you can. He calls you to tell the place and use of some bone—tell him and show how and why a bone has such shape, don't drop him into the quagmire of old theories. Man is a machine and must be studied to know how and why it does its work. You should and must ever remember that Osteopathy is a science that pertains to active, healthy man, and to know him you must acquaint yourself with his form and motion by study and contact. How much would an engineer know of an engine by theories drained from Thomas Benton, Henry Clay and Lewis Cass, for and against Morse's telegraphy, or Fulton's steam engine delivered in congress. These great men asked the great statesmen for wisdom and help, they were insulted by blackguarding and being called fools. The stone they stood on was individual knowledge.

\* \* \*

#### OUR FARMS, THE TABLES OF GOD.

ON THEM is found the food, wisdom, raiment and wealth of the world. By their successes we prosper, and by their failures all nations wither and die. On farms wise men and women are born. From the farm all of America's wisest generals, presidents and statesmen came. Our greatest men have only to look over their shoulders to see their fathers and mothers toiling with grain and herds. None but fools would fail to love the honest mother's grave who lived and died on the farm. On the farm is not the place to look for thieves, liars and hypocrites. Farms are the places and homes to find well posted men and women. One farm will grow more reformation



than the oldest city. In cities and towns are the places to find idiots born, not on the farm. The farmer's wife has something to eat and wear, and the pure blood of herself and husband keeps corruption away from her children. Her children are ignorant of the asylums, gallows and skeleton keys of a sneak-thief. The farmer's hand is rusty, so is a diamond, they are the jewels of the world, they shine when well dressed paupers have failed to be called even dim-lights. When I see a town woman fail to speak to a farmer's wife and family when they meet in town I wonder if that woman has not been a kitchen girl some time in her life. I pity the shoulders that carry such weak heads. Let us close and say, give due respect to merit without asking are you from a farm or the orphans' home, where the city sends the children of sotted fathers and heart-broken mothers.

### SOME OBSERVATIONS UPON THE REACTIONS OF MUSCLES AND NERVES.

\*CHARLES HAZZARD, PH. B., D. O., DETROIT, MICH

FEW Osteopaths can have failed to notice that in a considerable number of their cases puzzling changes of condition will frequently occur. Not every case will pursue that unbroken course of continual improvement so encouraging to patient and physician alike. Of this kind



of cases we are glad there are not many, but the average Osteopath must, when in the field of general practice, soon find it to be the rule that cases will have their "ups and downs." Sometimes, unfortunately for the patient's confidence in Osteopathy, the proportions of "downs" will preponderate, and then it begins to take the Osteopath a long time to explain why this is so, just as it took the old man a long time to explain to Maria why he found such pleasure in an occasional spree.

Now, I do not mean to say that these cases are "going bad," or that real progress is not being made. The fact is that as a rule the real corrective work is still going on, and, in the majority of cases, is progressing quite as rapidly as if the patient were feeling better.

What I wish to point out, however, is the fact that the Osteopath must be conscious of the great likelihood of an occasional "slump" in the patient's condition; must expect it, in fact, in certain cases, and

\*Dr Hazzard who formerly was a member of the faculty of the American School of Osteopathy, has recently accepted the chair of Theory and Practice in the same school. Dr. Hazzard will be associated with the school after Sept. 1st, 1900.

consequently be prepared to tell the patient, when this occurs, that he was expecting it and be ready to explain why such is the case. Nothing would be so unfortunate as for a patient to notice that these occurrences were puzzling and discouraging to the Osteopath, and it is my experience that unless one is upon his guard he may be in danger of losing a case which could most assuredly have been brought to a favorable issue after a sufficient course of treatment.

It is one thing to notice and expect ups and downs, and another to be able to fully explain them. Sometimes, as I have said, they are most puzzling usually, however, careful consideration will show adequate cause. Of course, there are a variety of reasons why a case will be better and worse, yet it has been my experience that an insight into Nature's workings within the body will always furnish a good clue to the causes of such conditions. It is the purpose of this article to point out, for the good of practitioner and student, certain facts which seem to evidence a law of cause and effect which may be found underlying these changes in a patient's condition.

I take it for granted that we are all familiar with the facts of physiology relative to the reactions of muscles to nerve conditions, and without going into a discussion of the scientific aspects of those facts, will base what I have to say upon them as an established foundation of scientific truth.

In my mind, the facts of the situation formulate themselves about as follows. Most cases coming under Osteopathic treatment show contracture in some tissue or tissues. Such contracture may be either the primary lesion, or secondary thereto, yet always is an active cause of disease. Almost no case, even though its main lesion be a bony one, escapes resulting contractures in muscles, ligaments, and other soft and fibrous tissues of the body, while many cases present such contractures as the primary lesion. Whenever they occur, such lesions, acting as mechanical irritants, result in derangement of function.

Now, a contracted structure, under the proper application of Osteopathic therapeutics to the lesions in the case, will relax, but it will generally soon contract again. Frequently this return of the contracture will wholly or partially destroy the relief the case has experienced after the first relaxation. Under further treatments, however, a gradual re-adjustment of parts takes place, and, *pari passu*, the condition of relaxation gains the upper hand, the variations in the patient's condition become less marked, and recovery follows.

To an Osteopath's mind there are numerous sufficient reasons why contractures should constantly return. Fresh irritation from the lesion, exposure to drafts, changes in the weather, catching cold, and numerous physical exigencies may cause such a result. One soon learns by experience that the slightest and most unexpected cause may set up fresh contracture.



While I do not claim that these facts will fit all cases, to my mind they will explain the constant better-and-worse condition of a numerous class of patients. These patients, it goes without saying are difficult to hold, and requires both tact and a clear comprehension of the facts to enable the Osteopath to satisfy their questionings and to retain their confidence. Moreover, it requires some perspicuity upon the part of the Osteopath to discriminate between cases which come in the above category and those which are really not yielding to the treatment. He should possess a well informed honesty brave enough to make him strongly encourage the former and to discourage the latter.

Reference to a few cases will illustrate my views:

In a case of sciatica, a bad position of the right innominate, consequent strain and contracture of the sacro-iliac ligaments, and a contracture of the muscles of the hip and thigh caused constant pain whether the patient were sitting, standing, lying or walking. Immediately after treatment much relief was experienced, patient could walk with greater ease and bend over to lace his shoes, something he had been unable to do for some time. Yet, sufficient return of contracture of the muscles and ligaments occurred to cause considerable pain upon motion, but he remained free from pain while quiet. Here, without doubt, the muscles had yielded considerably at the treatment, but had again contracted enough to irritate the nerve when brought into play upon motion of the limb, but not enough to irritate while quiet. Clearly, here was a clue to the fact that this case would yield rapidly to treatment, i. e., that each recurring condition of contracture would be considerably less, and that soon we should gain the upperhand over them. Such proved to be the case, and one month showed most satisfactory improvement, while at the end of the second month the patient walked freely without a cane or a pain, though not yet entirely cured.

A young lady had several years ago, sustained an injury by a fall from a bicycle. and about a year later, before complete recovery from this injury, had again met with an accident, this time falling from a flight of stone steps leading to the entrance of a public building. Her constitution was already weakened, as she had been a sufferer from anemia. Some time after the injury, there had gradually developed, without apparent cause, an increasing lameness in the left limb. It steadily resisted medical treatment, growing continually worse, until she was confined much of the time to her bed, and could walk about only with pain and difficulty. A spinal brace was being worn without much material benefit. The case had been diagnosed as sciatica, Pott's disease, and finally as nerve pressure, the physicians saying that they could not locate the pressure. They could do nothing they said, and told the parents that patience, quiet and time might restore her.

Upon examination I found weakness of the lumbar region of the spine

which allowed it to swerve slightly to the right. This caused the lower lumbar portions of the spine to drive at an angle upon the pelvis, narrowing the left sacro-iliac space and bringing the pressure upon the sacral nerves. The pelvis had tilted upward on the right, lengthening the left limb a quarter of an inch. There was a strain upon both sacro-iliac articulations, and much contracture and soreness of the muscles of the left hip and thigh. Movement of them in any direction caused much pain, and upon the right, flexion of the thigh combined with circumduction toward the median plane of the body likewise caused pain in the lumbar region.

The relaxation of contracted parts, which was readily accomplished in the first few treatments, resulted in great relief from the pain, and in the ability to walk much further than for months. Yet, following this walking, a recurrence of the contracted condition of the tissues caused a return of the pain. Throughout the course of treatment, although the work of correcting the lesions to the spine and pelvis went steadily on, the case was continually better and worse. Yet, the average of the patient's condition grew continually better, resulting in much betterment of the case, which is still under treatment. Overexertion or change in the weather would invariably result in fresh contractures, and in more or less pain. I have, however, seen from the first that though these variations in the patient's condition were unavoidable, they were yet incidental, and have strongly encouraged the case, results so far attained justifying such encouragement.

In a third case, scar tissue in the rectum, resulting from operation for piles, involved the nerve terminals in the rectal walls and caused constant pain and numbness in the limbs and feet. Examination also revealed an atonic condition of the rectum, allowing a slight prolapsus and wrinkling of its walls. This undoubtedly contributed to the production of the trouble. From the first, thorough stretching of the sciatic nerves and of the muscles of the limbs was followed by relief from pain, through relaxation of the nerves and muscles. But the pain would always return by the next or second day. Steady work upon the real cause of the trouble, directed to the absorption of the scar tissue and to the strengthening of the rectal walls, resulted in a steady gain in the patient's condition, gradually we have gained the upper hand, so that though the pain still recurs, there is less of it, and it is absent longer at a time. In this case relaxation of contracted parts resulted in immediate relief. Contractures recurring produced continual ups and downs in the patient's condition, but corrective work upon the lesion gradually led to a permanently better state.

Cases might be multiplied in support of my point, but I believe I have said enough to establish it. Such an understanding of many cases I think would be of much practical use to the Osteopath in the handling of a difficult class of cases.

86-87 Valpey Building.



## MACHINE AND MACHINIST.

JOSEPH H. SULLIVAN, D. O., MASONIC TEMPLE, CHICAGO.

OBSERVING a corliss engine of five hundred horse power, with its immense wheel in motion, its brightly polished cylinder showing care and attention, the regular action of the piston rod transmitting power, the eccentric working in perfect rhythm of opening one chamber in the cylinder as it closes another. With what feelings of awe one is inspired, how we respect the genius of the one who perfects such machine.

Suddenly the monster develops a disorder, the eccentric does not seem to do its work, the various parts act in a jerking manner, the machine shakes the whole building each time the wheel revolves, something must be done quickly to save the machine from ruin.

What is wrong? On investigation perhaps it is discovered that a set screw has through straining become loose; or one of the braces has bent, as a result the whole engine is jeopardized unless this is adjusted, will any amount of oil do the work? Ridiculous! Will the use of some other kind of coal be a remedy? Indeed not! Will the use of filtered water adjust things? No! We must quit theorizing and take off our coat and go to work, tighten the screws, straighten the bent rod, mechanical work is required.

In what does that machine resemble MAN the most wonderful of all machines, in whose body is found all the mechanical principles beautifully exhibited. The two cases are identical, why so? The Osteopath demonstrates it every day. You may sneer and try to make light of it but that does not alter the fact one iota; ridicule is not an argument, it is the weapon of the ignorant.

Here is a case of heart irregularity, the organ misses a beat every minute or two, that beautiful double system of nervous control, the stimulating or propelling power, and the inhibitory nerves or those acting as a brake are not in unison, just as we have seen in the case of the machine.

What does the Osteopath discover? Bad hygienic surroundings? No! In most such cases he finds a misplaced rib or several of them, due perhaps to a fall—a blow, or violence of some description. We do not even hesitate to claim that simply turning over in bed may throw a rib out of its true position, a rib may be strained as well as a wrist or a shoulder. Who will prove otherwise?

Feeling sure then that a rib in a false position is possible, we can readily see what effects follow at its articulation with the vertebra. It is possible for the posterior spinal branches to become involved, then the rami-communicantes, and following out these lines we come to the great sympathetic system with its two forces in control of the heart.

Such is the case as the Osteopath looks at it and he cures heart disease by following this line of thought, and by suitable treatment; he advises no change of climate, no system of diet, does not advise getting married or remaining single; these things are advised by our brethren of other schools, who say Osteopathy is dangerous. The Osteopathic machinist knows all those recommendations are made simply to disguise ignorance of the cause of disease.

As Osteopaths we know that the dreaded asthma responds as readily to the above treatment as does the heart trouble. What causes the typical barrel shaped chest in asthma? Are not the ribs on a center? So placed that the subject has little or no control over his intercostals? By an adjustment of these ribs back to the spine most cases of asthma are cured and the treatment bears no resemblance to massage either, the masseur does not know one rib from another.

Here is another case before us: a girl say eighteen, ever since maturity she has suffered at intervals torments indescribable, her life instead of being a continuous realization of nature's sweetest gifts in these the choicest moments of her life, seems strangely fashioned, medicine is worse than useless, what can Osteopathy do? It finds some of the lumbar spine in wrong position and adjusting same cures her, the machine adjusted goes about its work in harmony. Ask the child as to the danger in Osteopathy and she will laugh and reply that she loves it for its lack of danger.

So we might continue, but will forbear; the hosts of men, women and children walking the earth are living witnesses as to the utility of the science of Osteopathy, and the common sense idea of examining man mechanically for a cause for disease and its removal mechanically.

The sewing machine was wonderful, but it all hinged on the needle with an eye near the point; the telephone is wonderful, but in what does it differ from the middle and external ear? Simply a disc on which vibrations play. Osteopathy, we are told, is too wonderful to be true; on the contrary it is fully as simple as the telephone. Man needs no poison poured into his stomach; he rarely needs his abdomen opened by the knife, his nose burnt out or his sphincter and mutilated, the cause of disorder in these instances is largely mechanical and remote from the region of pain as we are proving in Osteopathy. That is why Osteopathy is table talk; if people had not been helped Osteopathy would have died a-bornin; it is however, a very healthy adult; the time is coming soon when the family physician will be obliged to learn how to relieve a headache or reduce a fever at once, instead of leaving it all for mother nature to accomplish in spite of drugs, in short all the schools will eventually have to use the up-to-date method, the mechanical method, in the combat with disease. They will, of course, decline to call their method "Osteopathy," but mankind will have been emancipated from the drug curse and all will be well.



## OVARITIS.

M. E. CLARK, D. O.

DR. ASHWELL says: Of all the organs of the body, scarcely any seem so prone either to functional or organic diseases as the ovaries; for I can in truth say that I have rarely, when examining these important organs after death, found them entirely healthy."

This statement is not only true from the standpoint of post-mortem examination but from the experience of Osteopaths who have specialized along the line of gynecology.

The most common of the ovarian disorders is ovaritis, or as the word implies inflammation of the ovary. The close relation existing between the ovaries, uterus and mammary glands makes the ovaries a very important factor in the etiology as well as treatment of diseases peculiar to women. This is brought out more clearly when we consider that menstruation is dependent upon ovulation hence interference with rupture of Graafian follicle is attended by dysmenorrhea or mammary disorders which are frequently cured by relieving the ovarian disorder which was the real cause.

The ovaries are two oval bodies situated in the true pelvis, to the sides of the uterus, below, behind and to the inner side of the Fallopian tubes. Their function is the maturation of the ova which are stored in the ovary to the number of 60000 as estimated by some authors. The blood supply is the ovarian artery which is accompanied by the ovarian plexus of nerves, both of which are between the two layers of the broad ligaments.

Entering at once into the subject we would say that inflammation is the result of one or two causes (1) mechanical obstruction or (2) vaso-motor paresis or in some cases paralysis. Congestion always precedes inflammation hence we would look for the causes of congestion. Pure blood is moving blood and if the current is interfered with even to the extent of a minute, lowered vitality results and toxic matters may form. In discussing the first cause of ovaritis the venous return has to be considered. The blood is gathered up by the ovarian veins, which carry it upward through the broad ligaments the left emptying at right angle, into the renal while the right empties at an acute angle into the ascending vena cava. On account of the absence of valves in the left vein, also on account of presence of rectum and the manner in which it empties, we find the left ovary the more frequently affected of the two. Again these veins are long, hence liability to pressure by neighboring organs. An impacted colon or a displaced viscus may cause this pressure which would result in congestion if not inflammation of the ovary.

The mechanical obstruction may be a prolapsed diaphragm which would affect ovaries and uterus most on account of their greater vascularity. The custom of tight lacing forces the lower ribs, to which is attached the diaphragm, downward, hence enteroptosis develops and viscera which should normally be in the abdomen are forced down into the pelvis. This

impedes return circulation, the current is slowed, congestion results, finally terminating in a great many cases, in ovaritis, endometritis, etc. Again a displaced uterus would produce a twist in the broad ligaments hence an obstruction to venous return since the ovarian as well as uterine veins are between the two layers. Other conditions producing venous congestion may be cited, but if the one regarding the viscera be closely studied it would include the majority of causes.

The most important if not the most common cause of ovaritis belongs to the second division viz: vaso-motor disturbance. Every vessel normally is in a condition or state of constant contraction. Every artery and vein except the very small have muscle fibers in their walls. These muscle fibers have nerves called vaso-motor nerves which keep up the tone of the vessel. By this tonicity the amount as well as rapidity of blood flow is regulated. These nerves like other nerves are controlled by a center and in the case of the ovaries it is located approximately at the 9th dorsal vertebra, that is the subsidiary center while the dominating center is in the brain. Inhibition of a vaso-motor center dilates the blood vessels, hence more blood or hyperemia and a lessening of rapidity of blood flow, while stimulation causes the opposite effect. Lesions affecting the ninth or tenth dorsal vertebrae affect blood supply to ovary hence in cases of ovaritis, from an Osteopathic point of view, displacements are looked for in that region. The lesion may be only a muscular contraction which has an inhibitory influence over the center or it may, as before said, be a subluxation of vertebra or rib.

If the case were a chronic one bony lesions would be searched for, if acute, muscular lesions, probably bony ones will be found. This will not only apply to ovarian disorders but to the other various disorders of the body.

The nature of the bony lesion may be a lateral, anterior or posterior displacement attended by soreness, probably an anterior condition is the most common on account of the relation of the articular processes. Also the lesion may be in the ribs corresponding to the 9th and 10th vertebrae. A turning or twisting of the rib would affect the sympathetic chain since it is situated very close to the head of the ribs. Again various troubles diagnosed as ovarian disease, tubal disease—appendicitis are in reality a slipped rib which causes the pain in that locality.

There is another important cause of ovaritis, that is the influence of the higher centers. The mind exerts a controlling influence over every organ of the body this being especially true of the sexual organs. If the organs are constantly irritated by vulgar literature or anything else which causes sexual excitement congestion results. This congestion produces an aching, and if persisted in, inflammation and disease result. Masturbation in the young lays the foundation for future ovarian trouble. The repeated unnatural congestions produced by the practice results in constitutional as well as local disease.



Again, singlehood is a cause of ovarian disorder. The ovaries were made for a purpose and if this purpose is interfered with disease usually results. From hospital reports we find thirty per cent. of ovarian cases in unmarried persons. Again, if artificial means are used to prevent conception nature is again interfered with and disease will come sooner or later. There is a vaso-motor disturbance resulting and finally the congestion leads up to inflammation. Sexual excesses have effects similar to masturbation. Frequent pregnancy weakens, leaving the patient in a neurasthenic condition. We have a case in mind in which there is extreme melancholy dependent upon frequent pregnancies, four of her children being born within a period of three years. This is the extreme of singlehood, either one being accompanied by disease.

The treatment of ovaritis osteopathically consists of (1) removing mechanical obstructions to venous return by working directly over and above ovary, raising lower ribs thereby raising diaphragm also lifting up the intestines which have been forced down into the pelvis, thereby removing the venous congestion which had resulted. (2) Correct displacements either bony or muscular in the region of ovarian center, which interfere with proper action of vaso-motors. The muscles can usually be relaxed by inhibition or pressure over the muscle itself, especially, if dependent on exposure but may be due to bony slips in which case the correction of the displacement would be the only logical treatment. In ovarian colic, which is a stage preceding ovaritis, relief can be obtained by work over and above ovary also treatment over center to correct muscular lesions which usually exist.

In chronic cases due to bony lesions, the correction of the lesion takes away the disturbance to the vaso-motor nerves, their tonicity is regained, the congested blood is forced out of the ovary and is replaced by pure blood, absorption and healing resulting.

In cases (3) where Nature's laws have been broken, repair as much as possible the evil already done by having the patient avoid sexual excesses and excitement thereby resting parts which have been overworked, at the same time give treatment to both ovary and center to help restore normal conditions by increasing tonicity of parts.

## HOT WATER IN THE TREATMENT OF FEVERS.

A. L. EVANS, D. O.

IT IS not my purpose in this brief article to enter into a discussion of the etiology of fevers nor a description of the phenomena attending them. Such discussions may be found at great length in medical text books.

I only desire to drop a few practical hints for the benefit of fellow practitioners in regard to the treatment of this class of maladies.

The firm of which I am a member, while not claiming by any means to have discovered water as a therapeutic agent, nor even as a valuable ally to Osteopathy in the treatment of fevers, claims to have discovered a new method of applying it which we believe to be of value. At any rate to us it was a discovery.

Possibly some one may have "discovered" it first; if so, we are unaware of it, and to those who are unacquainted with our method we address this article.

It is a fact known to most Osteopaths, I presume, that by strong pressure at the center for the pylorus in the spine in conjunction with proper manipulation of the stomach that the contents of this organ may be discharged into the duodenum. Especially is this true if the contents be liquid. For the past six or eight months with most of our fever cases, we have, after the usual treatment for fever, directed our patients to drink at least half a pint of water as hot as could be taken comfortably, which by the method above mentioned was at once emptied into the small intestines. We give this treatment ordinarily but once a day, and that the last thing at night. We give the water after the usual treatment because the tissues are then more relaxed, and also because perspiration generally follows and there is not the danger of taking cold that there would be if the patient had to be partially uncovered to be treated, as would be the case if the water were administered first.

In giving the treatment to empty the stomach we have the patient lie on the right side or half way between that and the dorsal position. The operator stands behind the patient and with the thumb of the right hand presses at the pyloric center, and with the left hand manipulates the stomach, the patient first drawing up the knees to relax the abdominal muscles.

In recommending and using hot water for this treatment we would not be understood as advocating a return to the ancient practice of giving exclusively hot drinks in cases of fever. On the contrary we favor cooling drinks as a beverage. But there are several reasons why we think that hot water is more effective when taken in connection with this treatment.

(1) It acts as a mild, though natural, stimulus to the processes of elimination.

(2) It more quickly induces perspiration

(3) We believe that the hot water as it traverses the duodenum causes a relaxation if not the opening of the orifice of the ductus choledochus.

We know that after using hot water as above described manipulation of the abdomen over the bile ducts results in a discharge of bile into the duodenum.

Other good results of this method that we have noted, and that might be obtained from water, either cold or hot, are as follows:

(1) It washes the stomach.

(2) It aids in keeping the bowels in a healthy condition.

(3) It is taken up by the lymphatic system and thus aids in getting rid of effete matter.



- (4) It keeps the kidneys active.  
 (5) It keeps the mouth moist and the teeth from sorder.

In one case treated by Dr. Owens of our firm where the fever continued more or less for about two weeks the skin was kept constantly moist.

During the time that we have been using hot water in this way we have treated pneumonia, typhoid fever, bronchitis, tonsillitis, bilious fever and la-grippe and have had excellent results.

While we have used water in this way mostly in acute cases there are some chronic conditions in which it might be applied with benefit. Among them might be mentioned diseases of the kidneys, liver and spleen.

This method has proven of immense value in the treatment of the morphine habit. In two cases that we have had the patients recovered with but few of the distressing symptoms which accompany the usual medical treatment of this dread condition. In these cases we used cold water but are now inclined to the opinion that hot water would be better.

So much do we think of this method that we have added an alcohol lamp to our office equipment for the purpose of heating water.

300-304 Miller Building, Chattanooga, Tenn.

[We do not understand that Dr. Evan's article is in any way intended to underestimate the value of Osteopathic treatment in fevers. You will notice that the article clearly states that the Osteopathic treatment is given first in order to stimulate the action of the excretory organs. Osteopathy has no relation to any other healing system. The use of hot water in the above cases was for the purpose of assisting in the processes of elimination after the Osteopathic treatment had removed the obstruction.—ED.]

## THE VALUE OF ANATOMY TO THE OSTEOPATH.

C. L. RIDER, D. O.

THE most extravagant terms would fail to exaggerate the importance of this study to the Osteopath. While other subjects—notably physiology—are of vital importance, anatomy is the underlying stone on which the entire science is built.



But the *method of study* pursued in acquiring a knowledge of anatomy is just as important to our profession as that the subject shall be studied at all, and that is where our advantage over the old school lies. The immortal Gray who commands the admiration of all students, knew the position and relation of the most intricate and complex parts of the human body more thoroughly than did any other man of his day, but with due deference to his wonderful knowledge all must concede that as an anatomist Gray lacked the practical ability of Dr. Still and for this reason, the latter

studied with the underlying principle of Osteopathy constantly before

him; the former knew nothing of this principle and so did not apply nor render as useful as possible his learning.

The aim of all instructors in the healing art should be to give their students practical ideas that may be successfully applied in the diagnosis and treatment of any and all conditions that may fall to their care. In anatomy this is best accomplished by a thorough course in demonstrations and dissections on the cadaver where all may see for themselves the structures, their positions and relations and thus have indelibly impressed on the mind all they have previously learned by description and any abnormalities that may be present in these bodies are pointed out so that the student may more fully understand such conditions in the living subject, lesions in the bony structure being especially good object lessons for the class.

However the normal condition of structures receives most attention, and when the student has a thorough knowledge of the proper adjustment of bones, muscles, ligaments, nerves, vessels, etc., he is taught to recognize any abnormal conditions that may be found in the large and varied classes of disease to which the human family is heir. It is in the operating rooms that anatomy is studied on the living subject and it is here that the student is given an opportunity to apply what he has learned and to skill his fingers in the detection of even very small lesions.

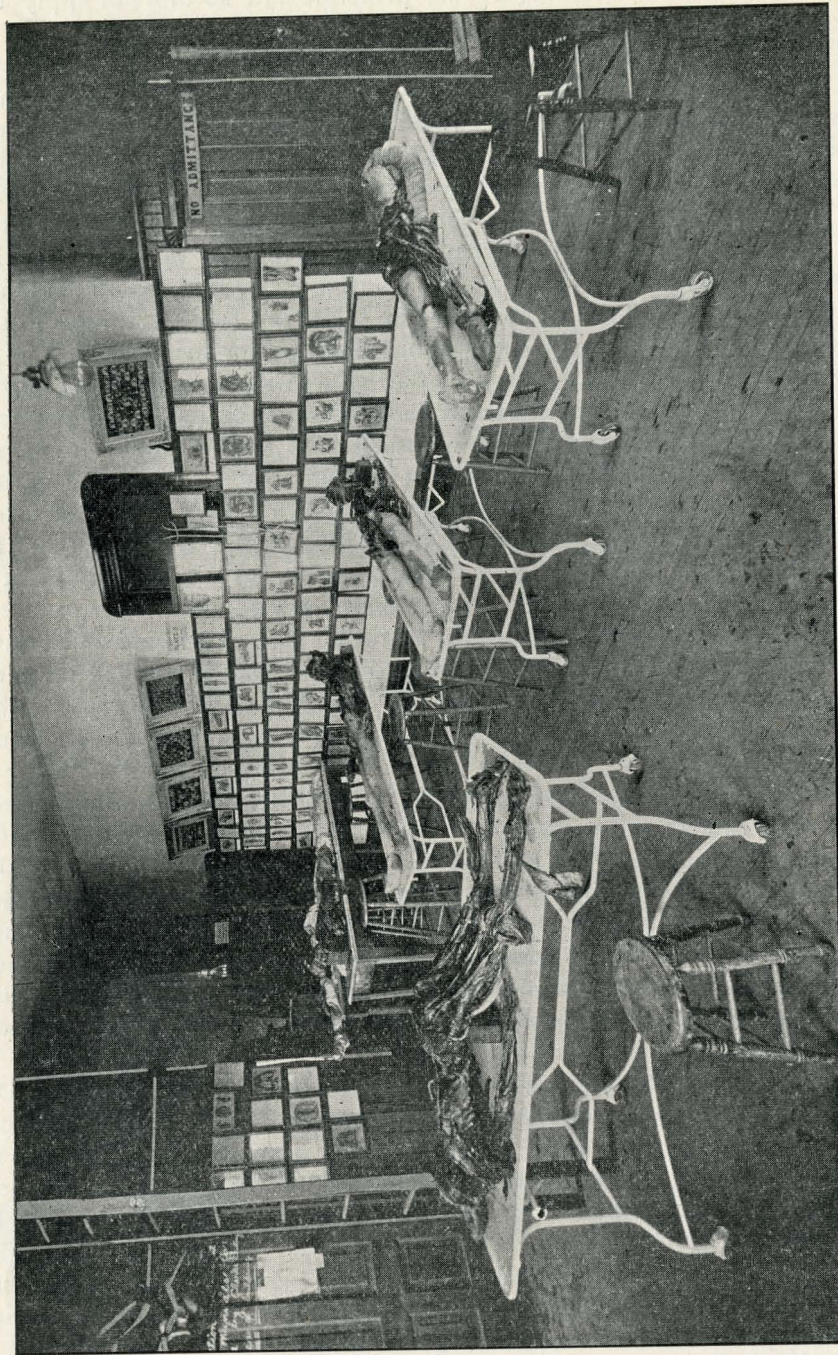
This is a department not found in any other class of schools which have for their object the teaching of methods of cure. When a student has been fully and carefully drilled on the normal conditions and relations of the human anatomy, any deviation however slight, is readily detected and adjusted.

While many volumes have been written by brilliant men on the subject of anatomy, and while they are most valuable to our students, they lack from our standpoint, the one great essential—practicability. To quote the Old Doctor "Where in all this vast array of literature do we find a single sentence that would teach the facts that a depressed clavicle may cause goitre; that a lesion in the upper dorsal is often responsible for stomach trouble; or that a slight dislocation of the hip may cause a pain of such intensity in the foot that physicians of other schools have often recommended amputation as the only possible cure?"

The discovery and application of the principles of this science by Dr. Still were the natural consequences of an active, inquiring and practical mind. Many have wondered that the discovery came at so late a period in the history of science, but no stranger than that the circulation of the blood was not recognized until its discovery by William Harvey in comparatively recent times.

Had it not been that the former possessed a vast store of correct anatomical knowledge, he would never have been able to unravel the mysteries that thickly surround the underlying causes of disease. He followed a method of investigation that was entirely his own with the result of the in-





DISSECTING ROOM.

roduction of a science that has been heralded from this to all points of the compass, in both our own and foreign countries; a science, that though so young as still to be considered in its infancy, has yet been the means of promoting more cures and relieving more suffering than any other method of treatment. So much having been accomplished by this infant science what may not be predicted for it when it has reached the commanding proportions it is destined to assume? And all this is the result of an unbiased and unprejudiced study of anatomy. Surely this is an inspiration for other ambitious workers along this line, who have not only their own resources to rely upon, but have at command a great store of information and demonstrated facts patiently and carefully gathered by the first investigator and founder.

Any amount of skill may be acquired by the diligent student in recognizing even very minute defects in the anatomical arrangements of patients, so much so, indeed, that a very correct diagnosis of a case may be made without any other aid than locating a lesion and then reasoning from this recognized cause to the probable result. The obstacle to a correct diagnosis in every case lies in the fact that a lesion at a certain point in the spine of one individual causes symptoms and general results often widely different from those produced in another individual with about the same lesion existing as the cause. Closer investigation, however, reveals the fact that in the first case the impingement is of such a nature as to affect a different set of nerves or vessels from those affected in the second case. It is the study of anatomy that prepares the operator for this important part of his duty and no other subject in the world would be at all useful to him in locating the cause of the trouble, or telling him how it might be removed.

Several scientists have discovered at different periods what might have developed into Osteopathic principles, but they invariably failed to put their discovery into execution or to investigate long enough along the line to make the knowledge useful. For instance, it has long been known that by certain pressure in the neck of a rabbit the vaso-motors controlling the circulation in the ear were acted upon, but there the application of the principle ceased and not one of them even dreamed that the pressure on the vaso-motors in other regions would reduce to normal the amount of blood in an hyperaemic organ, or that stimulation of the same nerves would increase the amount of blood when it is deficient. The famous Dr. Hilton would only have required a small amount of assistance from Dr. Still to have turned his study and investigations into the proper channel and what a fine Osteopath would have been the result.

The present is a time of both aggression and progression. It behooves the students and graduates of this school of science to bend every energy and employ every talent in the advancement and upbuilding of their profession. The people of the 20th century demand, that not only good, but the best in every department of science, shall be given them. It is truer





DR. RIDER SUPERINTENDING A DISSECTION.

than ever before that mediocrity in any walk of life is not recognized, but representatives of any profession who have risen above the common rank command the attention and admiration of all.

This science must progress and as in the past its discovery and development have been due to the careful study of anatomy, so in the future the continuance of this study must ever be the foundation on which the mighty structure will be built; a foundation so strong as to be able to resist the severest criticism of the enemy.

~~~~~

### GEORGIA ON THE WAR-PATH.

It will be remembered by the readers of the JOURNAL OF OSTEOPATHY that the legislature of Georgia passed a bill recognizing Osteopathy at its last session and that it was vetoed by the Governor at the instance of the medical profession of the state. Being successful in this they have been inspired with a hope of exterminating this new sect in the healing art. The editor of the Atlanta Journal of Medicine and Surgery in an extended article called upon the profession of the state to send in a donation of one dollar each with which to prosecute their cause in the courts. As this was not responded to very readily they issued a circular which was mailed to the profession urging a united effort to demolish the Osteopathic profession in the state. It was a question of no small importance as to how best open fire on the enemy. After some deliberation and discussion it was concluded that the grand jury should make the investigation. My case was taken up by the grand jury and after an extended investigation "no bill" was found. This enraged the M. D.'s very much. One of their number the next day went down to

the city court and swore out an accusation against me charging me with the practice of medicine. Thus the war has opened and they say they mean to carry it to a finish. They are after every one who comes in now. Dr. John Swanson, a graduate of the Northern School, lately located here and they have arrested him also. They mean to give us no quarters. They are threatening the others in the state and have opened up on Dr. J. E. Anderson, in Augusta. Over there the M. D.'s had a city ordinance passed taxing all method of healing not licensed by the state \$50 per year. Dr. Anderson was confronted by this and refused to pay it. It was referred to the local board of health. So far they have taken no action.

The M. D.'s of Atlanta, have introduced a similar ordinance in the council but I think we shall be able to head it off. Several students of different schools have written me with reference to a location in Georgia. I would say to all such that they run a risk of the kind of trouble we are in if they should come now, yet we should like more down here to help us in the conquest.

M. C. HARDIN.

~~~~~

Send ten cents in stamps and we will send you a copy of Judge Ellison's lecture on "The Legal Aspects of the Practice of Osteopathy," also a copy of the laws of the various states that have regulated its practice.



# Commencement Exercises

American School of Osteopathy.

## PROGRAM

Baccalaureate Sermon, Sunday June 24, 11 a. m.  
Rev. Charles Manley, Kansas City, Mo.

Class Day Exercises, June 27, 9 a. m.

Music, - - - - - Schubert Orchestra  
Address—Class President, Geo. M. Laughlin  
Music, - - - - - Schubert Orchestra  
Class History, - - - - - Guy Dudley Hulett  
Reading, - - - - - Edna Clair Cheatham  
Music, - - - - - Schubert Orchestra  
Class Poem, - - - - - William West  
Address, - - - - - Dr. A. T. Still  
Music, - - - - - Schubert Orchestra  
Class Prophecy, (Ladies) Frank D Bohannon  
Piano Solo, - - - - - Miss Maud Lowry  
Class Prophecy, (Gentlemen) Miss Emeline  
Tappan  
Music, - - - - - Schubert Orchestra

Class Reception, Wednesday, June 27, 8 p. m.

Organization of Missouri Osteopathic Association,  
Wednesday, June 27, 2 p. m.

Meeting of the Alumni Association, Thursday,  
June 28, 2 p. m.

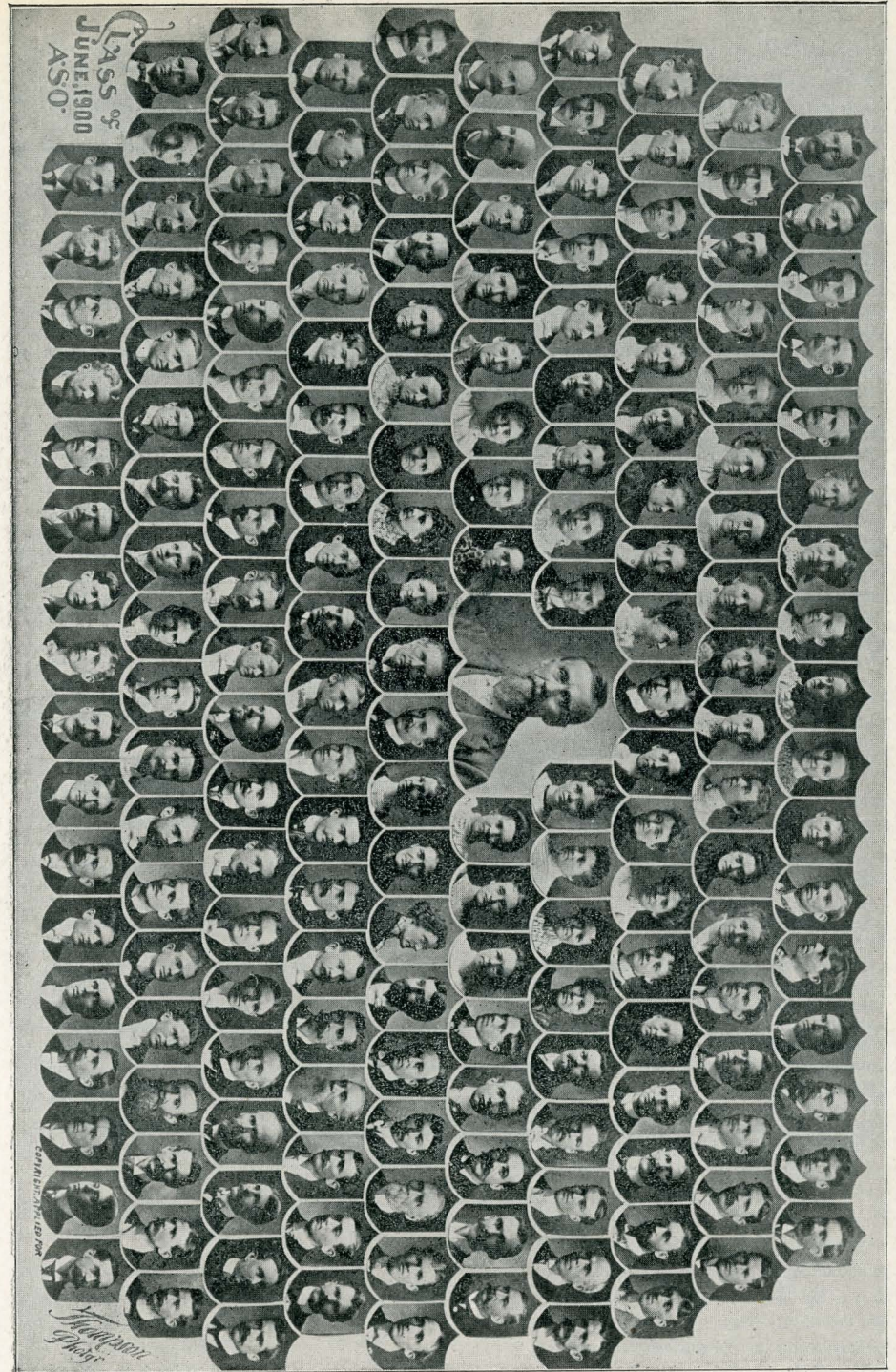
Commencement, June 28, 8 p. m.

Music, - - - - - Schubert Orchestra  
Invocation, - - - - - Rev. J. A. Smith  
Address, - - - - - Rev. H. Northcutt  
Music, - - - - - Schubert Orchestra  
Address—Class Representative - E. R. Booth  
Music, - - - - - Schubert Orchestra  
Presentation of Diplomas, - Dr. A. T. Still  
Music, - - - - - Schubert Orchestra

## Graduating Class, June, 1900.

Abernethy, J U, M D.....Troy, Miss  
Abernethy, M F, B S Mrs.....Troy, Miss  
Abernethy, Mallie M Miss.....Troy, Miss  
Aldrich, W H.....Cleveland, Ohio  
Baker, J E.....Arney, Ind  
Barnes, C W.....Kirksville, Mo  
Barret, Caleb D.....Loydsville, Ohio  
Bartholomew, E Jefferson.....Chicago, Ill  
Beal, E Clyde.....Clarinda, Ia  
Beall, Francis J.....Memphis, Tenn  
Beall, Francis J Mrs.....Memphis, Tenn  
Beaven, Leslie M.....Fulton, Mo  
Benneson, Harry K.....Kirksville, Mo  
Berger, Theodore P.....Wilkes Barre, Pa  
Berger, Grace Campbell, Mrs.....Kirksville, Mo  
Billington, Henry T.....Kirksville, Mo  
Bishoff, Fred.....Monte Vista, Colo

Bledsoe, James W.....Kirksville, Mo  
Bodine, Rufus Howard.....Paris, Mo  
Bohannon, Frank D.....Anna, Ill  
Booth, E R.....Cincinnati, Ohio  
Bowker, Celia Miss.....Panora, Ia  
Bowker, Ellsworth.....Panora, Ia  
Bowman, Gertrude Miss.....Lewistown, Mo  
Brown, John W.....Kirksville, Mo  
Browne, Elva M.....Gallatin, Mo  
Briscoe, Bertie Miss.....Lewistown, Mo  
Buckmaster, O L.....Kirksville, Mo  
Bullard, John R.....Memphis, Mo  
Bunting, Henry Stanhope.....Evanston, Ill  
Burkank, Mary Anna Miss.....Chelsea, Vt  
Burton, B O.....Keosauqua, Iowa  
Bush, Willie Miss.....Kirksville, Mo  
Busbart, Eli E.....Bethany, Ill  
Cain, A D.....Kirksville, Mo  
Cain, P R.....Kirksville, Mo  
Campbell, Cora May, Miss.....Kirksville, Mo  
Campbell, Chas A.....Kirksville, Mo  
Carter, Walter C, D D S.....Kirksville, Mo  
Chase Emma A Miss.....St Paul, Minn  
Cheatham, Edna Clair Miss.....Rawlins, Wyo  
Chesney, Ernest N.....Kansas City, Mo  
Cobb, Henry M.....Pattonsburg, Mo  
Conner, Sallie M Miss.....Kirksville, Mo  
Cookson, Everett.....Kirksville, Mo  
Coons, Jessie M Miss.....Rutland, Ill  
Covey, H P.....Miltonvale, Kans  
Crawford, D D.....Kirksville, Mo  
Crawford, J Stanford.....Kirksville, Mo  
Culley, Edgar William.....Avon, N Y  
Curl, Lewis F.....Gallatin, Mo  
Curry, Etna Kelso Mrs.....Kirksville, Mo  
Daley, Chas I.....Ft Madison, Ia  
Davis, Ida E Miss.....Kirksville, Mo  
Davenport, Bert M.....Hiawatha, Kan  
Dinsmoor, Silas.....Merced, Cal  
Doane, Adele Miss.....Denver, Colo  
Donahue, J Edward.....Sycamore, Ill  
Dwiggins, Walter E.....Rossville, Ill  
Elliott, Marion S.....Flandrean, S D  
Ewing, Elizabeth B Miss.....Baltimore, Md  
Fassett, Fred Julius.....Montpelier, Vt  
Fellows, W B.....Des Moines, Ia  
Fitzharris, Peter Joseph.....Brooklyn, N Y  
Fletcher, Clark F.....Montpelier, Vt  
Forquer, J W.....Kirksville, Mo  
Frogge, G B.....Rutledge, Mo  
Fryette, Solomon J.....Chadron, Neb  
Furnish, William M.....Paris, Mo  
Gamble, Harry Wilson.....Wayne, Neb  
Gates, Mary Adaline Miss.....Leon, Ia  
Gayle, Birdie L Mrs.....Monroe, La  
Gilman, Carrie A Miss.....Honolulu, Hawaii





Gilmour, G H.....Sheldon, Ia  
 Graham, Geo W.....Brooklyn, La  
 Graves, Anna M Mrs.....Redding, Ia  
 Greenwood, Victor H.....Kirksville, Mo  
 Griffin, Clyde W.....Kirksville, Mo  
 Hamilton, Nellie Miss.....Kirksville, Mo  
 Haley, J E.....  
 Haney, Elizabeth C Miss.....St Catherine, Mo  
 Harding, W C Mrs.....Jacksonville, Ill  
 Harlan, Myrtle D Miss.....Kirksville, Mo  
 Harris, B Rees Miss.....Aylesford, Nova Scotia  
 Harvey, Elizabeth Mrs.....Queen City, Mo  
 Hathorn, Charles Clifford.....Livingston, Mont  
 Hays, Lola Lillian Miss.....Princeton, Ill  
 Hiett, Alva.....Berwick, Ill  
 Hoefner, J Henry.....New Melle, Mo  
 Hollingsworth, F.....Phoenix, A T  
 Hook, Albert E.....Lewistown, Mo  
 Hook, Matthias.....Wellsfleet, Neb  
 Hoover, D Mapel Miss.....Memphis, Mo  
 Hulett, Guy Dudley.....Manhattan, Kan  
 Jackson, Mary Elizabeth Miss.....Kirksville, Mo  
 Kellogg, J H.....Kirksville, Mo  
 Kelso, Sophronia B Miss.....Aux Vasse, Mo  
 Kennedy, Ralph V.....Rochester, Minn  
 Kennedy, S Y.....Lake Como, Pa  
 Kerr, J A.....Kirksville, Mo  
 Keyte Ivy, A.....Kirksville, Mo  
 Kilgore, J Mark.....Mexico  
 Kimball, Sherman.....Northfield, Vt  
 Landes, H E.....Kirksville, Mo  
 Laughlin, Geo M.....Kirksville, Mo  
 Lewis, Richard G, A. B.,.....Chillicothe, Ohio  
 Lincoln, Fred C.....Buffalo, N Y  
 Linder, J F.....Kirksville, Mo  
 Linhart, Curtis Clinton.....Browning, Mo  
 Littlejohn, James B.....Chicago, Ill  
 Ludden, J B.....Kirksville, Mo  
 Laughlin, Geneveive, Mrs.....Kansas City  
 Lyda, Levi W.....LaPlata  
 McClanahan, Mabel M Mrs.....Kirksville, Mo  
 McClung, Bert.....Kirksville, Mo  
 McCormick, Blanche A Miss.....Ruston, La  
 McFall, Frances Miss.....Tremont, Ia  
 McMurry, N F.....Kirksville, Mo  
 McRae, Ira Willis.....Shibley's Point, Mo  
 MacGeorge, Florence Miss Dunedin, New Zealand  
 Mahaffy, Mary Isabel Miss.....Kirksville Mo  
 Mahaffy, Ira F.....Brashear, Mo  
 Maxwell, E M Mrs.....St Louis, Mo  
 Mayhugh, Ina Miss.....Rothville  
 Meeks, Wm.....Kirksville  
 Merkley, E H.....Syracuse, N Y  
 Meyer, Otto E.....Quincy, Ill  
 Millard, Fred P.....Denver, Colo

Miller, Chas Z.....Mt Ayr, Ia  
 Morris, T C.....Rockland, Idaho  
 Moss, Joseph M.....Miltonvale, Kan  
 Moyer, Llewellyn E Mrs.....Kirksville, Mo  
 Nesbit, Robert E.....Bullion  
 Nugent, Emma Bruner Mrs.....Bedford Ind  
 Oliphant, Pearle Miss.....Kirksville, Mo  
 Overstreet, B Frank.....Newtown, Mo  
 Ownby, W W.....Kirksville  
 Pemberton, Stanley D.....Kirksville,  
 Peters, F F.....Winside, Neb  
 Proctor, Arthur C.....Pocatello, Idaho  
 Putnam, Daniel Proctor.....Sioux City, Ia  
 Putnam, Harrison Albert.....Sioux City, Ia  
 Ray, A D.....Kirksville, Mo  
 Reagan, Thomas Edgar.....Lincoln, Neb  
 Reed, Wilmont.....Kirksville, Mo  
 Reesman, A J.....Bullion,  
 Reesman, Burthel F.....Bullion,  
 Rickart, Emma V Miss.....Quincy, Ill  
 Roberts, Katherine Mrs.....Kirksville, Mo  
 Roland, Arthur A.....Greenville, Ohio  
 Sabin, H Waite.....Montpelier, Vt  
 See, Samuel D.....Granville, Mo  
 Shackelford, Jennie Trotter Mrs Lewistown  
 Shackelford, J W.....Lewistown  
 Shackelford, N H.....Lewistown,  
 Sheldon, Tristram W.....Fitchburg, Mass  
 Sigler, H Roy.....Kirksville, Mo  
 Sigler, W D, Jr.....Kirksville,  
 Sisson, Ernest.....Genoa, Ill  
 Skeen, Geo S.....Jacksonville, Ill  
 Smith, Benj P.....Miltonville, Kan  
 Snavey, John W.....Leon, Ia  
 Spaunhurst, John F.....Fulton, Mo  
 Spencer, J J.....Kirksville,  
 Staff, Gambetta F.....Kirksville,  
 Stephenson, Troy C.....Brooklyn, Ia  
 Strait, Hiram H.....Minneapolis, Minn  
 Stuart, John Sutherland.....Glens Falls, N Y  
 Sullivan, Henry Broughton.....Chicago, Ill  
 Sutherland, William G.....Mapleton, Minn  
 Tappan, Emelin Miss.....Balwinville, N Y  
 Taylor, Mignon A Miss.....Columbus, Miss  
 Traughber William F.....Centralia, Mo  
 Walker, Mary Wheeler Mrs.....Blue Rapids, Kan  
 Walrod, Burton E.....Beresford, S. D  
 Warren, G S.....Kirksville, Mo  
 Weston, Blanche M Mrs.....Browning,  
 Wilkin, Thomas John.....Syracuse, N Y  
 Williams, Kate G Mrs.....Chicago, Ill  
 Webber, Forest Gles.....Cherokee, Ia  
 West, William.....Chicago, Ill  
 Woltmann, Fred K.....Neeper, Mo  
 Wotmann, Henry C.....Neeper,  
 Wood, Roger B.....Aux Vasse

The Journal of Osteopathy.

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ON to Chattanooga. On July 5, 6, and 7, is the date of the convention of the A. A. A. O.

\* \* \*

June 22d, the anniversary of the birth of Osteopathy was observed with an appropriate program, rendered in the Memorial Hall of the A. S. O. Speeches were made by Judge Ellison, Dr. A. T. Still, Hon. S. M. Pickler and Dr. A. G. Hildreth.

\* \* \*

DR. H. E. NELSON of Louisville, Ky., is to be praised for the gallant and persistent fight he has made for Osteopathy. He knew he was in the right and never thought of withdrawing from the fight until the finish. With the assistance of the Kentucky Osteopaths he carried his case to the higher court and won hands down.

\* \* \*

THE new catalogue of 1900-1901 of the American School of Osteopathy, is now ready for distribution. The catalogue is a neat affair, it contains forty-eight pages and is nicely illustrated by half tones, showing the various laboratories and interior views of the building. Any one desiring a catalogue will address the American School of Osteopathy, Kirksville, Mo.

\* \* \*

W. A. GRAVETT of the third term, is responsible for the following recipe:

AGUE CAKE.

- 2 weeks in Arkansas.
- 7 cups malaria.
- 2 hours sun.
- 1 cucumber.
- Shake well.

DR. W. C. WILLARD of Wilmington, N. C., reports an interesting case wherein Osteopathy has again shown its merits over other systems. Dr. Willard, while on a sea voyage on the steamer Wilmington, has occasion to test the Osteopathic method of treatment for sea sickness. The results were remarkable. In a number of cases treated every case was immediately relieved and speedily cured.

\* \* \*

THE rapid advance made by Osteopathy the past few years, and the resultant increase of imposters, many of whom have been "diplomaced" out by alleged "schools" of Osteopathy which bear neither standing, nor the recognition of the Associated Colleges of Osteopathy, and whose charlatanic practices are alike detrimental to the honest practitioner and the public, opens up a field for a "blue book" of Osteopathy. There is promise that this need will be supplied by an exhaustive work now being compiled and edited by an author who has become deeply interested in the new science. The work will be published by Daniel M. Carr, of St. Louis, Mo., the coming autumn under the copyrighted title "Who is Who in Osteopathy." According to the plan of the work it promises to be a valuable book of reference to all interested in the profession, and an important addition to Osteopathic literature.

\* \* \*

THE following editorial is taken from the Indian Witness, a paper published by the Methodist Publishing House in Calcutta, India.

One of our contributors asks about the blue-light bath as a remedy for rheumatic affections. We have no light, red, white or blue, to throw upon the question. But we have recently heard of the new method of treating rheumatic ailments which an American lady, as we understand, has introduced into Calcutta. We refer to "Osteopathy," which differs from massage in that the treatment aims to get at the bones rather than the muscles, but is equally humane and gentle. For osteoarthritis, osteoperiostitis, osteochondritis, osteomalacia, and other oste-combinations, there is ex-



cellent authority for the belief that there is nothing like Osteopathic treatment. Indeed, we have heard of a case of successful treatment by this heroic method during the past week. There is some talk of opening a deaconess Osteopathic hospital in the city in the near future. We wish the undertaking all success.

\* \* \*

#### Another Osteopathic Victory.

The following account is taken from the *St. Louis Globe-Democrat* dated June 21.

#### OSTEOPATHIC PRACTICE UPHELD.

Frankfort, Ky., June 20.—The Court of appeals to-day enjoined the State Board of Health from interfering with physicians of the Osteopathic school in their practice. The court ruled that the practice of Osteopathy is not a violation of the statute in regard to the practice of medicine.

This case has received considerable attention in Osteopathic circles. Some time ago Dr. H. E. Nelson, a graduate of the A. S. O., was arrested in Louisville, Ky., for violation of the medical laws of Kentucky. He was convicted at the first trial on account of the hostility of the state board of health, but upon appeal to the higher court he received a favorable decision, the substance of which the above account contains. Elsewhere under this heading will be found a full account of the affair and the opinion of the court.

\* \* \*

THE Tennessee Branch of the A. A. A. O., met in the lecture hall of the Willcox building, Nashville, on May 10, and was called to order by the president, Dr. J. R. Shackelford.

Minutes of the last meeting were read by Ass'tant Secretary, Dr. Charles Owen, and approved.

The following new members were admitted to membership: Drs. Brown Godwin, T. L. Drennan, Bessie A. Duffield.

It was moved the word twenty be struck out of Section 2, making it read: Five dollars for initiation fee in place of twenty-five. Motion carried.

Moved and carried that the following clause be added to section 9:

"Any member who shall advertise on stationery, card, or in any manner, any one as an assistant, who has not attended a reputable school of Osteopathy, shall be, after due notice, dismissed from the Association."

The officers elected for the ensuing year were: President, Dr. Ed. H. Shackelford, Nashville; First Vice President; Dr. Brown Godwin, Lebanon; Second Vice President Dr. T. L. Drennan, Jackson; Secretary and Treasurer, Dr. Bessie A. Duffield, Nashville; Assistant Secretary, Dr. H. R. Bynum, Memphis; Trustees, Drs. J. R. Shackelford, A. L. Evans, W. F. Link.

After the election of officers the meeting of the A. A. A. O., to be held at Chattanooga, July 5, 6, 7, was discussed, and all Osteopaths urged to be present. The members of the Tennessee Association were requested to act as a special committee on reception.

The Association adjourned to meet in next regular session at Memphis.

\* \* \*

The Atlas Club banquet, June 11, was the most recherche affair ever given in Kirksville. Beauty was out in force, costumes were stunning, wit flowed, and all was merry. The big club rooms were decorated in red and white, the air was redolent with the fragrance of roses, soft strains of music strayed out into the opalescent moonlight, and thought took on the wings of fancy.

'Twas the regular semi-annual function in honor of the graduating members, and in honor of the Axis club, a sister fraternity.

When Dr. Fassett led the guests out to the board there burst upon their sight a vision of exquisiteness tempered by the soft light of candles. No sally a mangle could have looked more alluring. Plates for one hundred and twenty had been laid amid the flowers and myrtle, and a company of pretty girls in red and white stood by to serve the menu.

Then there floated on the balmy wind of evening, the song of "Sunset", clear, and sweet, and touching, as only rendered by P. Lee Hodges.

Mr. Chiles followed with a burlesque sermon, true but funny; Miss Schaub sang "Goodbye;" and Herbst flung out upon the night the "Valse Caprice", by Jackson, and won a second encore.

Miss Juanita Bailey next recited "Haunted by a Song." It was well received.

Fasset was a most noble toastmaster and after the first course of "Congealed Red Corpuscles," otherwise called cherry frappe, he called on Dr. Booth to respond to the toast, "Many are called but few are chosen," to which the professor replied in an address full of thought, dealing largely with those qualities which go to make up success.

Other speakers of the evening were Dr. E. Sisson, on "Why I studied Osteopathy"; Paul M. Peck, "Migratory Osteopaths"; Dr. J. E. Donahue, "The Atlas Club from Afar"; J. J. Schmidt, "Observations from the Half Way House"; Dr. H. K. Benneson "Medicine in its Broadest Sense"; and Dr. Hildreth, on "What to Expect." Dr. Hildreth's talk was full of rich advice to the young Osteopath. The Doctor held the close attention of all while he told of the difficulties to be met, and the satisfaction that comes with success.

The menu was as follows:

"Congealed Red Corpuscles."  
"Mythological Myology."  
Semi-membranosus-Semi-tendinosus-Biceps  
Olivary bodies, Saccharine Digits,  
Tunica Propria.

"Coagulated Extract Bovine,"  
M-D's Favorite Prescription,  
Variegated Cerebral Congestors,  
Fe-C 12 H 10 O 11-H 2 O (?).  
Liquor-Sanguinas.

In leaving this subject too much can not be said of the taste and elegance displayed in the serving of this banquet by the ladies of the Episcopal Church who acted as caterers for the occasion under the direction of Miss Gehr.

#### Personal Mention.

W. J. Smith, D. O., of Ironton, Mo., was a recent visitor at the Infirmary.

Harry McLain, D. O., of Mason City, Ia., was a recent visitor at the school.

W. A. Fletcher, D. O., of Cedar Rapids, Iowa, was in Kirksville recently.

H. Tom Ashlock, D. O., is now associated with Dr. Ivan Dufur of Williamport, Pa.

Dr. E. E. Westfall, of Mt. Pleasant, Ia., is here to attend commencement exercises.

Mrs. Ligon, D. O., of Mobile, Ala., is expected to be here during commencement.

W. H. Jones, D. O., of Audrain Mich., was at Kirksville for a day or two recently.

Miss Frances Dameron, D. O., of Galveston, Tex., is visiting her sister in this city.

W. J. Seaman, D. O., has changed his location from Circleville, Ohio, to Huntington, West Virginia.

W. R. Laughlin, D. O., goes to Chicago for the summer, where he will take a special course in dissection.

Miss Clara Proctor, of Ames, Iowa, will visit her brother Prof. Proctor during commencement.

Z. Propst, D. O., has returned from Cleveland, Ohio, where he was associated with Dr. Eckert.

Dr. F. S. Gage, of San Antonio, Texas, is visiting his brother Fred W. Gage, a third term student.

Fred J. Fassett, A. B., will spend the summer at Yale where he will take a course in experimental physiology.

Dr. C. P. McConnell, late member of the faculty of the A. S. O., visited the school recently. He is now located in Chicago.

Pearl Meeks, D. O., is home from Missouri Valley, Iowa. It is reported that he will take a partner from the graduating class.

C. W. Hartupee, D. O., of Des Moines, Iowa, will be associated with M. F. Hulett, D. O., of Columbus, Ohio, after July 1st, 1900.

T. B. Mansfield, D. O., of Wichita, Kan., has sold his practice to J. O. Strother, D. O., of Winfield, Kan. Dr. Mansfield will locate in the east.



D. L. Conner, D. O., and Miss Luella Conboy, of Phoenix, Arizona, were married June 7th. Dr. Conner will practice in Flagstaff, Ariz., for the summer.

Dr. Roy Bernard, of Centerville, Iowa, is visiting his mother in this city. Willie West of the graduating class is attending to his practice.

Silas Dinsmor of the graduating class has been elected to a position in the Southern School at Franklin, Ky. He will accept.

Miss Grace Huston, D. O., of Oklahoma City, Oklahoma, is here to attend her sister, a third term student who had the misfortune a short time ago to break her leg.

Wm. Hartford, D. O., of Campaign, Ill., was here for a day recently. Dr. Hartford is a hustler, besides attending to a large practice he has found time to send a number of students to the A. S. O.

Herman Goetz, D. O., of Quincy, Ill., while at the school recently, reported that he had closed his office in Quincy prepara-

tory to opening an office in St. Louis or Chicago.

In our new catalogue the name of H. M. Still appears as a member of the Board of Trustees. This is a mistake as Dr. H. M. Still resigned from the Board some time ago.

Dr. E. E. Beeman, of Montpelier, Vt., will spend the summer in Paris, France. Dr. Pemberton of the graduating class will take charge of his practice during his absence.

Canada Wendell, D. O., of the firm of Taylor & Wendell of Peoria, Ill., was here recently for the purpose of employing a lady operator. Miss Cecil Bush of the graduating class will be associated with that firm after July 1st.

"Mrs M. A. Shoup, of Carmi, Ill., but a native of Ohio, was in the legislative fight in Ohio. She came there at her own expense and remained throughout the entire session, working in the interest of Osteopathy, side by side with Drs. Hildreth and Hulett.



PAUL M. PECK.

A pretty contest throughout, with odds in favor of the A. S. O., until the last race had been run was the first athletic field day meet held June 8th, jointly between the A. S. O., the State Normal and the C. S. O. The contests were witnessed by a crowd of 500 enthusiastic supporters of the contesting schools. The program included the five field tests and five track events provided for in the inter collegiate rules. The track was heavy and slow but several of the field trials, the pole vault, high and broad jumps developed records to be proud of. The meet was won by Normal with 40 points. A. S. O. scored 37 and C. S. O. 18.

The all-round championship was won by Jo Daniels who earned 24 points for Normal. His twin brother Will, followed with 9 points.

For A. S. O. Pettit won 15 points taking first place in every event he contested. Geo. Cleary won two firsts, scoring 10 points, Dobson 2, W. Davis 3, Love 1, Eastman 1, and Track Manager Jones 5 points.

The summary:

#### FIELD EVENTS.

Pole vault—Pettit, A. S. O., won, Johnson, Normal, second; Jo Daniels, Normal, third; 10½ feet.

Shot put—Cleary, A. S. O., won; Powell, C. S. O., second; Jones, A. S. O., third; 30 feet one inch.

Running high jump—Pettit, A. S. O., won; Dobson, A. S. O., second; Davis, A. S. O., third, 5 feet four inches.

Hammer throw—Cleary, A. S. O., won;

Powell, C. S. O., second; Sansberry, Normal, third. 77 feet.

Running broad jump—Pettit, A. S. O., first; W. O. Daniels, Normal, second; Jo Daniels, Normal, third. 19 feet 7½ inches.

#### TRACK EVENTS.

100 yard dash—Jo Daniels, Normal, won; W. O. Daniels, Normal, second; Love, A. S. O., third. 11 seconds.

220 yard dash—Jo Daniels, Normal, won; W. O. Daniels, Normal, second; Leslie, C. S. O., third. Time 23 seconds.

440 yard dash—W. O. Daniels, Normal won; Jones, A. S. O., second; Leslie, C. S. O., third. Time 54 seconds.

880 yard dash—Conway, C. S. O. won; Jones, A. S. O. second; Hargis, Normal, third. Time 2:20.

Mile run—Conway, C. S. O., won; Jo Daniels, Normal, second; Hargis, Normal, third. Time 5 minutes.

120 yard hurdle—Jo Daniels, Normal, won; Davis, A. S. O., second. Time 16½ seconds.

220 yard hurdle—Jo Daniels, Normal, won; Leslie, C. S. O., second; Eastman, A. S. O., third. Time 28 3-5 seconds.

The base ball season came to a sudden and early termination. The boys never revived from the defeat administered at Quincy by the reserves, of that city. The score of 26 to 4 tells the tale of a game in which errors seemed to outnumber the cheering points. Following this, Manager Fellows was asked to cancel the games at Macon, Ottumwa and Des Moines, and thus the sport has ended.

The Athletic Association concludes the season with a balance in the treasury and a cordial support from the student body.

While it is yet early to indulge in football prognostications friends of the game will enjoy the announcement that the A. S. O. team will be the first team to meet the Missouri Tigers at Columbia next fall, which is a merited recognition of A. S. O. athletics.

Ernest White, who coached the Tigers last year has been employed to take the Osteopathic team in charge next fall. With proper support, A. S. O., should be heard from in the foot ball arena next fall.

## OSTEOPATHY.

Recognized By the Court of Appeals.

THROUGH AN INJUNCTION.

Old School Enjoined from Interfering  
With the New School.

Louisville Courier-Journal.

Frankfort, Ky., June 20.—[Special]—The long fight of the doctors of the old school of medicine to prevent graduates of the new school of Osteopathy from practicing their profession in Kentucky, was ended to-day by the granting by the Court of Appeals of a perpetual injunction restraining the State Board of Health from interfering with them or prosecuting them for practicing Osteopathy.

The opinion of the court was written by Judge Hobson and concurred in by all of the members except Chief Justice Hazelrigg. It holds that the American School of Osteopathy and similar institutions are not medical colleges within the meaning of the Kentucky Statutes, and that the act of the Legislature to protect the people of the State from the practice of medicine founded merely on experience without scientific knowledge does not apply to graduates of these institutions; that a graduate of one of these schools is in no sense a physician or surgeon, and that he does not practice medicine. It holds that they may be prosecuted for prescribing or administering medicine or performing surgery without holding the certificate of the State Board of Health, as provided by law.

\* \* \*

REVERSES JEFFERSON CIRCUIT COURT.  
The decision was rendered in the case of Harry Nelson against the State Board of



Health, appealed from the Jefferson Circuit Court. Appellant, a citizen of the State, alleged that after he had taken a regular course at the American School of Osteopathy at Kirksville, Mo., he has been practicing this system of healing for his support; that appellee was about to have him arrested for practicing Osteopathy or prosecute him under the act entitled "An Act to Protect Citizens of the Commonwealth from Empiricism." He prayed that appellee be enjoined from molesting him in his business or profession as an Osteopath, or pursuing him criminally therefor, and if he was not entitled to this relief, then that a writ of mandamus be awarded him compelling appellee to recognize and indorse the American School and to issue him a certificate entitling him to follow his calling in the State.

On the final hearing the lower court dismissed the action, refusing the complainant any relief. He appealed the case to the Court of Appeals.

\* \* \*

## SYNOPSIS OF THE OPINION.

In reversing the decision of the lower court Judge Hobson said:

The proof shows that Osteopathy is a new method of treating diseases, which is said to have originated with Dr. A. T. Still, at Kirksville, Mo., about the year 1871. At the time the proof was taken in this case there were in attendance at the school established by him, something over 500 scholars from twenty-nine states of the Union and several from Canada. In connection with the school was an infirmary, at which from 300 to 500 patients were regularly treated. The buildings of the school are shown to be commodious and suitable for its purposes. The patients treated at the infirmary, as well as those treated by appellant, appear to have been satisfied with what they received, and many of them to have been materially benefited. There are four or five other colleges of Osteopathy, which, with the one at Kirksville, form an association, and in five states of the Union Osteopathy has been recognized by statute. The testimony of the witnesses, the character of the professors and the evi-

dent sincerity of their statements, leave no doubt in our minds that the school at Kirksville is a reputable school of Osteopathy; but whether it is a reputable school of medicine within the meaning of our statute or what are appellants' rights, if it is not, are very different questions, depending upon the proper construction of the act itself. The terms, "physician," "practice medicine" and "medical college," used in the act have a well defined popular meaning, and were used, we think, by the Legislature in this sense. The term physician refers to those exercising the calling of treating the sick by medical agencies, as commonly practiced throughout the state at the time the act was passed.

The term medical college refers to those schools of learning teaching medicine in its different branches, at which physicians at that time were educated or schools of that character organized since. At such an institution an essential part of the instruction was in teaching the nature and effects of medicine, how to compound and administer them, and for what maladies they were to be used. In such institutions surgery is an essential art of the instruction. Without a knowledge of surgery or medical agencies no person would be deemed equipped to practice medicine by any medical college; for those things lie at the base of the instruction given in such schools.

Osteopathy teaches neither therapeutics, materia medica nor surgery. Bacteriology is also ignored by it. As we understand the record, it relies entirely on manipulation of the body for the cure of disease. Its theory is that a large number of ailments are due to irregular nerve action, and that by stimulating or repressing the nerve centers by manipulation they enable nature herself to right the evil. It administers no drugs; it uses no knife. It does not profess to cure all diseases. When a case is presented requiring surgery or medication the Osteopath gives way to the physician. Faith cure or magnetism has no place in its system; it relies wholly upon manipulation aiding the vis medicatrix naturae.

## NOT A SCHOOL OF MEDICINE.

The main things taught in the school are physiology, anatomy and the treatment of disease by manipulation. The system is new and of necessity imperfect yet; but if we may credit the evidence in this record, is often efficacious where the regular practice is ineffective. Still a school which teaches neither surgery, bacteriology, materia medica nor therapeutics cannot be regarded as a medical college within the popular meaning of those terms as understood in this state when the act in question was passed.

Having reached the conclusion that the school at which appellant graduated is not a medical college within the meaning of the statutes it remains to inquire whether this act applies to him at all. The subject matter in the words of the Legislature in passing the act was to protect the people from the practice of medicine founded merely on experience without scientific knowledge. \* \* \* If this statute applies to him it also applies to trained nurses and all others of that class who for compensation administer to the wants of the sick. The result of such a construc-

tion would be to compel every one to employ a registered physician to care for him when sick, or to trust himself entirely to gratuitous services, however much he might prefer skillful nursing to medical treatment. \* \* \* Appellant is in no proper case a physician or surgeon. He does not practice medicine. He is rather on the plan of a trained nurse. If by kneading and manipulating the body of the patient he can give relief from suffering we see no reason why he should not be paid for his labor as other laborers. Services in kneading and manipulating the body are no more the practice of medicine than services in bathing a patient to allay his fever or the inflammation of a wound. Appellant may not prescribe or administer medicine or perform surgery, but so long as he confines himself to Osteopathy, without the use of medicine or surgical appliances, he violates no law and appellee should not molest him. On the return of the case the court below will enter judgment granting appellant a perpetual injunction restraining appellee from interfering with him or prosecuting him for the practice of Osteopathy as above indicated.

## CLINICAL REPORTS

REPORTED BY E. E. WESTFALL, D. O., MT.  
PLEASANT, IOWA.

## CASE 1.

## Inflammatory Rheumatism:—

Mr. G— a man aged 27, was taken suddenly with inflammatory rheumatism, with all its characteristic symptoms. The regular medical treatment was tried first, but the patient grew worse. I was called, and found the case well established. Every joint swollen twice its normal size and stiff. Suffering great pain, could not turn in bed nor feed himself. Every movement caused him to scream with pain. The bowels were constipated, kidneys almost clogged, and secreted only a small quantity of highly colored urine. I first reduced

the fever, then the treatment was directed to liver and kidneys and sweat centers. The next day there was a marked improvement and the seventh treatment the case was discharged and in a few days the patient returned to his business.

## CASE 2.

## Nervous Prostrations—

Mrs. J—, a lady of 22 years, was brought to my office suffering with a very bad case of nervous prostration, and with great tendency toward insanity. They had tried a number of medical physicians but the nervousness grew gradually worse. Her friends were told by these physicians that she was fast approaching insanity. She



would spend hours crying to see her mother who had been dead fifteen years. She suffered greatly from insomnia stomach trouble, and *female weakness*.

As a last hope she was brought to me. On examination I found 1-2-3 cervical vertebrae misplaced to the right, the 6th and 7th dorsal to the left, and 4th and 5th lumbar posteriorly.

After the examination I told the friends I could promise them nothing as I could not prophesy what the outcome would be. But was willing to do what I could to relieve her. After the first treatment she never had another crying spell. The third treatment relieved the insomnia. In five weeks time she was discharged cured. It has now been seven months since and none of the symptoms have returned.

## CASE 3.

Willie P—, age 11, had suffered greatly with pain more or less constant in his leg and much of the time he was confined to his bed. On examination found the effected limb much smaller and shorter than the other. The muscles were flabby and shrunken, and very tender on pressure. The cause of his trouble was in the lumbar region of the spine and was removed in one treatment, and he has not had an ache or pain since. The muscles are growing fast and circulation restored. And no one can now scarcely tell which was the effected limb.

## CASE 4.

**Spinal Curvature:—**

Miss A— has suffered for years with spinal curvature in the lower dorsal and lumbar regions causing many aggravating troubles peculiar to her sex.

She took three months Osteopathic manipulation and was entirely relieved and now she sings the praises of Osteopathy.

## CASE 5.

**Acute Peritonitis:—**

On April 20th, I was summoned in haste to the home of Miss C—. I found her suffering great agony from a case of *acute*

*peritonitis*. Her case was very critical. It looked as if she was very near death's door. She was beyond speaking and unconscious. Heart very weak and irregular, vomiting every few minutes; abdomen greatly swollen and rigid, and pain constant, very sensitive on pressure. A medical doctor who saw the case said he thought she could never recover. In five days I discharged the case and now she is as well as ever. Her friends think Osteopathy the greatest healing science of modern times.

## CASE 6.

**Sciatic Rheumatism:—**

Jesse S— had been suffering with sciatic rheumatism. So severe was his suffering that it was impossible for him to sit down long enough to eat his meals. He either had to stand or lie down. He had tried the medical treatment and become disgusted with their liniments, pills and porous plasters. He sought the Osteopath. His trouble was found in the lower lumbar region; especially at the 5th; this was corrected and his sciatica is no more.

REPORTED BY H. C. WOLTMANN, D. O.

**Dislocated Rib:—**

Mrs. B— aged about 30, the mother of two children, the youngest 7 months old, applied for treatment. She thought she had liver trouble, had been constipated for several years, but suffered intense pain in the shoulders when at such work as sweeping or anything that called for muscle effort, she would feel a peculiar sensation which she described as a clot of blood passing up from her left ovary to her shoulder after which she would have a pain in her shoulder the rest of the day. Examination showed that liver was practically normal, left ovary very sensitive, and 12th rib on left side almost vertically down, quadratus lumborum on left side very sore, with tender spots along the spine but no bony lesions. After 1st week of treatment constipation ceased. After three weeks of treatment 12th rib remained in normal position, the globus

hystericus and pain in shoulder ceased, she no longer thought she had liver trouble and said she never enjoyed better health.

REPORTED BY J. W. FORQUER, D. O.

**Weak Eyes:—**

Miss B— had been troubled with weak eyes, so that she was compelled to wear glasses for over two years. Her eyes would pain her severely if she left her glasses off for five minutes. Lesion, second dorsal lateral to the left. Gave her five treatments and she was enabled to do embroidery work without the aid of her glasses.

## CASE 1.

REPORTED BY WILL D. SIGLER, D. O.

**Hysteria:—**

Mrs. Richey, South Franklin St. Trouble dated back 8 years to miscarriage and menopause, since which time patient has had hysterical fits at each full moon. On examination, the lesion was found (not in the moon) but in the spine. The patient did not suffer a single spell after first treatment in the middle of April. She is now strong and hearty.

## CASE 2.

**Female Trouble:—**

Bertha Richey, daughter of the above, age 13, suffered from congenital female trouble; four years standing, reached puberty at nine years. Severe sick headaches and general failing health. Two and a half month's treatment has made her a new girl. Both can be interviewed on Mondays and Thursdays in room 8.

REPORTED BY MRS. E. M. MAXWELL.

**Tapeworm Removed by Osteopathy:—**

Mrs. Chas. Bergoman of Kirksville, Mo. aged 35 years, weight 150 lbs. Mother of five children, she had been treated for two years for tapeworm with no results, applied to me for treatment the latter part of October. Not having taken Osteopathic

treatment before, the first week could give but two treatments, as the treatments made her too sore, after which I treated every day for five days, prescribing liquid diet, after the seventh treatment, the worm was passed alive. On examination of patient, I found an inactive liver, also a lateral curve extending from from fourth to eighth dorsal. Treatment applied strictly to the liver, both to the center in spinal cord and abdomen. This proves that Osteopathy will do the work, even to removing tapeworm.

MRS. GRACE C. BERGER, D. O.

**Female Trouble:—**

Miss F— troubled with metrorrhagia and constipation for two years, patient anemic found upon examination right innominate slipped upward. I corrected lesion and trouble entirely disappeared.

REPORTED BY O. E. MEYER, D. O.

**Stomach Trouble:—**

Mrs. L. C. Kerr, aged 24 years, for the last six years at times vomited blood and retained but little food. Discharged cured after 8 weeks of Osteopathic treatment.

REPORTED BY W. J. RHYNSBURGER,  
D. O., SUITE 35, DAVIS BUILDING,  
DAYTON, OHIO.

## CASE 1.

**Piles:—**

Mrs. S— suffered several years from protruding piles with occasional inflammation in the parts. Cause—constipation, weak nerve and blood supply to rectum and lower bowels, associated with prolapsus of walls of rectum; the latter probably due to irritation of the nerves in lower lumbar region caused by strain from over-lifting. One month's treatment last spring removed the trouble and has so remained.

## CASE 2.

**Sore Throat:—**

A chronic case of sore throat with more



or less constant inflammation and irritation was cured after six weeks treatment. Cause—Marked tension and rigidity of ligaments along entire cervical region with considerable tenderness at 2d and 3d cervical, effecting pharyngeal branches of vagus. Enlarged tonsils probably augmented the trouble. Reducing tension in cervical region and freeing the nerve and blood supply reduced the tonsils and removed throat inflammation.

REPORTED BY SHERMAN KIMBALL, JUNE CLASS, 1900.

Miss J—aged twenty, had suffered for nine months with dysmenorrhea and severe pain in left hip extending down back of leg. For about four days prior and during the menstrual period she was confined to her bed and could not walk at any time without causing great pain in hip. Upon examination I found a lesion at 10th and 11th dorsal vertebrae which affected the innervation to the ovary and on palpation of abdomen I found an enlarged and painful left ovary. After three weeks treatment the lesion was corrected and the pain had entirely left the hip and ovary. The next menstrual period was perfectly normal all symptoms having disappeared.

EFFIE SISSON, D. O.,

REPORTED BY J. W. BLEDSOE, D. O.

**Ovarian Hyperesthesia:—**

Mrs. P—aged 39 years. Her trouble starting from the 30th day of September, 1899, by giving birth to a ten pound boy, after which she had symptoms of extreme ovarian hyperesthesia, the pain was so severe that the attending physician gave injections of morphine day and night until the region between the lower part of breast bone to about the level of the crest of ilium was completely discolored. She sometimes gave entirely away to emotional symptoms, but otherwise the special senses were natural. She had severe spasms of the abdominal muscles which was accompanied by diarrhoea. Upon visiting Mrs. P. found the lesions were only muscular and the treatment was solely for hysteria. A rapid recovery followed.

REPORTED BY E. J. BARTHOLOMEW, D. O.  
**Leucorrhoea:—**

Lady 30 years of age, married, had slight deviation of lower dorsal and lumbar vertebrae to left, laceration of cervix from last labor with tenderness over uterus and ovaries—severe pain upon micturition. Upon correction of spinal lesion, requiring less than one month's treatment, health was restored.

CARL P. McCONNELL, M. D., D. O.,

ERNEST SISSON, D. O.,

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The examining previous to treatment is conducted by Dr. Still's son, assisted by the operators. After examination the patient is assigned to the rooms in which he or she will receive treatment, and placed under the care of an Osteopath best suited to the case.

As yet no hospital or sanitarium has been provided in connection with the Infirmary. Patients are cared for in hotels, boarding houses and private residences within easy reach. Charges for board and room in private residences are from \$3 to \$6 per week; in hotel from \$5 to \$10 per week.

The fees for treatment at the Infirmary are \$25 per month. Where patients are unable to come to the Infirmary for treatment, an extra charge of \$1 to \$2 per visit is added.

A representative of the Infirmary meets all trains, day and night, to help all patients who may need assistance and see that they are properly cared for.

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## W. J. Conner,

Formerly Operator in the A. T. Still Infirmary, Kirksville, Mo.

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Graduate Bolles Institute.      MRS. BIRDIE LA NIER GAYLE, D. O.  
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1:30 p. m. to 4:30 p. m.

DR. MAURICE B. HARRIS, OSTEOPATHIST.  
Graduate of Dr. Still's American School  
of Osteopathy, Kirksville, Mo.  
403 Chemical Building, 8th and Olive Streets,  
ST. LOUIS, MO.  
Office Hours—9 ty 12 a. m. and 2 to 4 p. m., except  
Sundays. Saturdays, 9 to 12 a. m.

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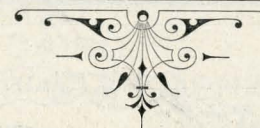
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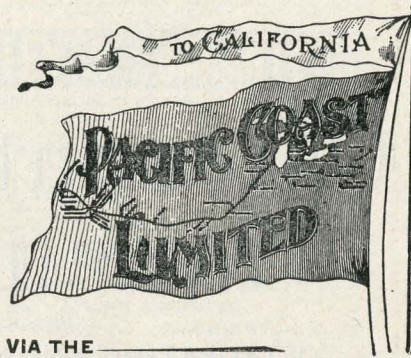
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