

# **The Osteopathic Physician**

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# The Osteopathic Physician

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Number 1

## The Day Has Come When We Need a More Militant Osteopathy

By Henry Stanhope Bunting, A. B., D. O., M. D.

THE day has come when we, the osteopathic profession, must assume the responsibility of teaching the laity the plain truth about the peril of relying upon old time methods of combating various common diseases.

Many people die needlessly every year—die for want of intelligent treatment of their bodies at the hands of physicians who profess competency.

We know that this is true.

The M. D. either does not know it, or he will not admit it if he does. He seems to love his theories more than human life. He has an idea that his bread and butter will not let him admit it. And perhaps it won't—if he feels that he has got to make his bread and butter that way, and in no other way, so far as therapeutics is concerned. We have waited nearly two decades for him to change his viewpoint and come to ours.

But, meanwhile, our fellow creatures die for want of good common sense attention—die in many cases when *we know* their lives could easily have been saved.

Now, I want to put it up to you, my fellow osteopaths, who know these facts and who have kept silence through the past fifteen years in regard to this situation:

*"Why do we keep silence?"*

*"How far do we share responsibility for these needless deaths by maintaining silence in the face of this all-too-evident malpractice?"*

If we know the truth, have had full opportunity to see the light through coming into a knowledge of osteopathy, and from personal experience with hundreds of cases are absolutely sure that it will save many a life which medical methods forfeit—if we know this fully and yet keep silence, then I say to you, one and all, that our responsibility for these needless sacrifices to professional bigotry is greater than that of the M. D.'s who actually become "death-watches" when they should be "life-savers," but "who know not what they do."

We must all be judged according to our light.

We have had the light, fellow osteopaths. Shall we remain content to hide our knowledge under a bushel indefinitely and let our fellow creatures perish when merely giving them knowledge—knowledge as to what constitutes proper healing and who are sane physicians, would save them?

You will recall the parable of the lights as taught by Buddha. Night came upon a village and darkness enveloped every household. There was only one man in the community who possessed a tiny light. Yet one neighbor after another came to his door, lighted his taper from that one flame and went back to his own dwelling to give radiance and cheer to his own household. And in this way the whole people came and borrowed of the light of first man until at length the entire village was illuminated. And yet in the end the light of him that had kindled the lights of the whole people was not diminished in the least!

That light is knowledge.

He who has it robs not himself by the giving to his neighbor.

Osteopathy is such knowledge. Dr. A. T. Still is one man who was prefigured in Buddha's beautiful parable as a "light-bearer"—a veritable Prometheus of this modern time who stole the fire of truth from high-walled heaven, who wrested knowledge out of darkness. From his lamp of knowledge, which he began loaning to his fellow men in 1874, he has come to illumine my life and yours, and many hundreds of thousands of other lives, with the blessings of his insight and reasoning and experimentation into the issues of life and death, and with the new curative system which he has given to needy man.

You, individually, are a partaker of this light in your professional knowledge and equipment, Brother and Sister Osteopath. You are ready enough to sell your knowledge and service to your needy fellows *when they come to you and ask for it*—and, no doubt, oft-times you give to them freely without money and without price when they are needy and can't afford to buy.

But—how much of your light are you giving to those of your generation *who don't know enough to ask for it* because they know little or nothing about osteopathy—what it is, and what it does?

Do you not feel before your Maker who has vouchsafed you such unusual opportunity in life that you owe it to your fellow creatures—not only to be the best doctor you know how in your own individual and private capacity—but also to be a light-bearer to the other homes that you cannot enter for the sheer force of their numbers, and to illuminate minds to whom you can talk intelligently through print, but with whom you may never pass an uttered word? In other words, haven't you by virtue of your birthright as an osteopathic physician a plain and emphatic duty to tell your generation the plain, frank, *brutal* truth about disease and its cure, as best you know it?

I believe you have.

Do you imagine that I refer to an order for field literature?

I do not.

I am discussing a broader principle—the fact that it is *your duty and mine* to tell our generation the truth about this healing situation which would help save many a life, but which—either through excessive modesty or sheer cowardice on our part—we seldom or never voice except in undertones among ourselves.

This plain but neglected truth is that old-time methods and new-time methods of treating the sick apart from osteopathy kill many a person whose life would be spared if given the chance afforded by anatomical adjustment.

Isn't that plain gospel truth as you understand it?

Then why in the name of mercy haven't we been telling the truth about this matter *all this time*?

Is your silence and mine prompted by an over-strained sense of "courtesy" and kindness toward the doctors of other schools? Are we afraid the people won't believe the truth when we tell it to them? Do we distrust our own convictions or our power to put it adequately into words? Or is it due to deficient realization of *what is due from us in our position as physicians, as doctors, as teachers* who happen to know some all-important vital truths that other kinds of doctors don't seem to know and whose duty should compel us to speak freely?

We know that if the situation were reversed—if the drug schools held the key to health, as osteopathy does—if osteopaths were the "death watchers" rather than the "life savers" in pneumonia, typhoid fever, la grippe, acute indigestion, and such common ills—we know of a surety that the M. D.'s would show no compunctions in telling the public the whole truth, in exposing our weaknesses and errors, in branding us as ignoramuses and enemies to society and they would rise up straightway and put us out of practice. In fact, they try to do some of that sort of thing, now, in spite of our vantage ground and as a recognition of their position of peril and with the facts all against them. Has it been pity on our part that prevented us righting this situation, correcting the public view fully and reversing the relative positions of the drug and osteopathic professions as regards public confidence? Then, pray, who is most entitled to pity—the doctors or their patients? Common humanity should make great claims on us and we should feel our first allegiance to the sick, not to those who profess ability to treat them and who take the price, but without doing the one most essential thing to cure.

How very far we really are then, from being opportunists—we osteopaths, having practically all the cards stacked in our favor, as it were, and then to play such a diffident or weak hand in general educational and publicity matters that the great bulk of the world as yet *doesn't even know* that we are really "safe" physicians to entrust human life to—and, as a plain matter of fact, the great majority of mankind as yet would not entrust human life to us! In the hour of peril they would be afraid to.

This is true merely because we permit it to remain true.

We have the greatest opportunity in the world to crusade for the acceptance of our principles by taking the public into our full and broadly published confidence, if we but tell the all-important truth about these life and death issues, in ways that will command attention, and at times that will interest practically everybody.

We know that many sufferers stricken with ills such as pneumonia, typhoid fever, la grippe and acute indigestion are allowed to die through the ignorance of the M. D.'s, when competent osteopathic attention would save them. Isn't this true? We know it is true—true beyond cavil.

Then *why don't we let the people know it? Why don't we make the people know it?*

I say we are not opportunists if we don't, if we can't, if we won't—and the man who is not an opportunist and who lets his talents

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rust when he might use them for the amelioration of human conditions deserves to have his opportunity pass from him. And it usually does. It goes into hands more able to improve it. The sceptre of power passes to the man who knows how to wield it. No matter who first stood in the line of the purple. The king who rules is the king who is fit.

Now here for fifteen or eighteen years the osteopathic profession has been going along quietly making its growth and priding itself most of all that it attended strictly to its own business and let the other doctor alone in his province. That was necessary in the beginning because we were then weak in numbers, much less experienced, much less sure of our ground and we had an inward feeling that the truth was so startling that not many people would believe it if we did tell it. It was a new and revolutionary one felt the whole public could not accept it all at once. The M. D.'s outnumbered us several hundred to one. Perhaps we feared to cross swords with them as champions for a scientific principle, realizing our personal weakness to do full justice to the great healing principles which we incarnate and represent. No doubt it was just as well to delay militant osteopathy to the day when we could give better proof of the faith that is in us. Our first two decades have been a period of necessary incubation and adolescence.

But has the full grown man, osteopathy, not arrived?

Is he not able now to claim his full birth-right and take it?

If not, when shall he?

I believe that the day is at hand to put off our bashful ways, take the witness stand as scientific physicians in the High Court of Humanity, and preserve our brief and plead in the case of Death vs. the People, and then call for the verdict of an intelligent generation.

What would I have the profession do?

Tell the truth, the *whole* truth, and nothing but the truth.

Speak it with the voice of authority on all opportune occasions.

Write it.

Publish it.

Lecture it.

Interview it.

Circulate it as periodic literature aimed to tell the blunt truth to the laity.

Imbue our patients with it.

Demonstrate it anew on every appropriate occasion.

Call attention to the repeated and innumerable failures of the polite medical treatment of the day as shown by the frequent deaths from common diseases.

Show how the shirt-sleeve diplomacy of osteopathy goes to the bedside of the sick and dying and actually takes hold of the machinery of life and fixes it, so that deaths from the same diseases are actually very less frequent under osteopathic care. The facts will talk. Compile the facts. Get the data. Proclaim them.

Every member of the American Osteopathic Association and every member of every State Society of Osteopathy if enlisted to report every case treated for just one year of—say these four diseases only, la grippe, pneumonia, typhoid fever and acute indigestion—with the prime end in view of ascertaining the mortality in these cases under osteopathy, taking them just as they come—will give a basis of statistics about treatment during the current year that would startle the world and enthrone osteopathy as king of healing systems.

Exhaustive case reports are difficult to get our busy, and often over-worked doctors to compile, but such statistics merely reporting on the number and outcome of a limited number of the commoner diseases could be easily

compiled and ought right now to be in the archives of the A. O. A. for 1911.

This is only an incident of the great crusade of awakening that I advocate the osteopathic profession to adopt.

We took a bold step forward in this direction in Chicago last August, when the American Osteopathic Association for the first time in its history went on record (in such a way, at least, that the public knew anything about it), by issuing an "invitation" to the other schools of medicine to submit to a competitive test and let the people see which system, osteopathy or either of the three drug schools, saved or lost the greatest number of patients.

That one challenge hurled at the time-entrenched battlements of drugging gave osteopathy more widespread attention in a day, made the people realize more fully the position of real commanding importance of our therapeutics, and excited more favorable interest and comment for osteopathy than it had ever achieved by all other means in any year of its history.

The general public said so frankly. Many an editor printed it. And the natural fears which some of our less resolute members entertained that it might hurt osteopathy to be so blamed honest and outspoken in its convictions, vanished into nothingness, leaving the big educational value of the challenge on record in the brain cells of millions of people.

The fact that editors did not hesitate to handle the issue facetiously did not materially lessen its value. All the greatest issues of the day, including those of religion, morals, science and statescraft, are handled facetiously in our public prints nowadays and more solemn truth about solemn subjects and world progress is promulgated through the educational influence of newspaper and periodical cartoons than in any other way. Once men hurled phillipics of eloquence and forged bolts of logic to advance their reforms. Now they draw funny pictures and burlesque the main actors in every great movement; they set the world to laughing and all of a sudden everything focuses into its real proportions in the public mind and the truth appears in all its radiance. Whereas the world once tortured to mould the minds of men and change opinions, it now amuses—makes folk laugh, and the subtle psychology inherent in good humor seems to clear the cobwebs out of minds, to banish error and to enable the right to be understood and the truth to prevail.

Great are wit and humor as the more modern media of enlightenment! And instead of being "boneheads" enough to get "sore" when the world of journalism laughs at our expense as osteopaths, let us join in the laugh heartily and before it is over be sure we improve the shining hour of fellowship to drive the truth home with fresh courage! Laughter is the suffrance by which we gain attention. And the great are more often lampooned than the trivial.

So don't be chump enough to take yourself too seriously, to insist that the world take you with unmixed seriousness, fellow osteopath, for the man who takes himself too seriously, and too universally seriously, is a more humorous proposition than he ever imagines.

For these various reasons that was a great step forward which the osteopathic profession took last August in challenging the older schools to a show down for results and if osteopathy stands to its guns on that line of propaganda it will be able to evangelize the world for osteopathy in your time and mine. If it doesn't it will not and it can not.

Just remember that the thing which is going to bring osteopathy forward now by leaps and bounds is the sort of statescraft and diplomacy which makes other great human institutions. The prevailing spirit of the profes-

sion must be one of energy, aggressiveness and all-conquering advancement. The modest virtues that we so greatly admire in some individuals who are not leaders or molders of human institutions will not answer at all as the moving spirit and guiding inspiration of our whole profession. Those modest violets among us who prefer the quiet mossy nook where they can escape public attention and be spared the pains of combat for principles and who do not relish a fight to defend the faith that is in them, may be all well enough and all admirable enough in their way—and truly they are—but they are not leaders of our great movement, they never have been and they never will be, and they should not expect that the profession will adopt their views and imitate their chosen policies.

Dr. A. T. Still never would have battered down one gate or battlement of drug medicine had he been of that type.

The reformer is a warrior. He must fight or stay in oblivion. He must crusade who would have the truth he represents become accepted of all men.

I maintain that we osteopaths as a profession, have not been crusading enough in recent years. We are too often and in too many places and in too many ways at a quiescent standstill—a stage of social compromise with drug physicians. That challenge to drug medicine at the Chicago convention was a step in the right direction and it marks what I hope may be a new departure in our general policies as a profession—a beginning of a grand new osteopathic "forward movement"—a new burst of motion and momentum, but along the same old tracks.

Let us press forward to new victories until the world will be set free from its bondage and osteopathy shall be known, revered and trusted in almost every average household.

Is the prize worth fighting for?

Finally, let us not forget that it is a war to the death between osteopathy and the drug systems. We can't both be right. We can't both flourish. We can't amalgamate. We cannot mix without losing your identity and becoming hybrids. Our desire for courtesies outweighing our desire for human progress may cause us to sign a truce with the exponents of antagonistic systems of therapy. But when we do we sacrifice duty to personal comfort and mankind to class perquisites—and when we do we are not worthy disciples of Father Andrew.

Let us not deceive ourselves. The M. D.'s know it is a war of extermination between osteopathic adjustment and drugging or the tradition of drugging. That is why they have as professions, employed every available agency in city, county and state governments, in the army and navy, and in the service of great quasi-public corporations like the life insurance companies and railroads, to retard the public acceptance of osteopathy. That is why they fight today to make legislators and courts think of us as charlatans. That is why they fight to crowd us out of positions on state boards. They know at the show down that their methods lose out. They know we are surer of our ground, even if they don't know why, and they know they are *not*. So they fear us. They fear extermination as a profession. They fear we shall osteopathize the practice of healing until they may have to go back to college and when they have returned, qualified, they fear further the need of having to hang up their coats and roll up their sleeves and work while they wrestle to save life against pneumonia or acute indigestion. Really, it is so much easier to "order" treatment given and to prescribe drugs in lieu of treatment, as they do today, that we cannot criticize them for preferring the old and easy way and resisting the oncoming of the new with valiant opposition. They fight us, as they have always fought us—the *organized*

medical profession has always fought us and will always fight us—because they fear us. They know it is a war of extermination for one system or the other. We can't well blame them for fighting for life. But we can blame ourselves if we don't wake up with new fire and zeal and fight our movement forward until it negatives their opposition completely. We would indeed be fools not to be aware of the great privilege that is given us to fight the fight of truth to conquer—or be conquered, if we are going to permit it by extermination, "benevolent assimilation" or any other plan.

The latest step in this movement of the M. D.'s to entrench themselves still more fully in power is their effort to get a national medical portfolio created—a cabinet position for an M. D.—to give more imperial powers to their own organization. Of course they call it a "health bureau." It is nothing of the sort and their effort is to cinch their own perquisites and misuse power to withstand as much as possible the further advancement of osteopathy and kindred movements for medical freedom.

## "Is the Physician a Death-Watch or a Life-Saver?"

**B**ELIEVING that the opportunity is at hand for a more "militant osteopathy" and that entire frankness with the people will unlock the door to complete confidence in osteopathy, I have written a very unusual article for the laity this month entitled, "Is the Physician a Death-Watch or a Life-Saver?"

It is not a discourse on academic subjects—which the average person may care very little about—but is full of news and human interest and it presents a situation which must make a very strong personal appeal to every member of society who reads it.

In my own belief it is the strongest and most convincing presentation of osteopathy that I have ever penned. It is strong because presented in such a way that people will read and accept it. I believe that it will be eagerly read by nine out of every ten persons into whose hands it falls. I am sure it will convince the average lay reader regarding the originality and merit of osteopathic treatment very much more successfully than any of the best articles we circulate—which too often, I fear, cut out consideration of the very vital issues presented in this particular editorial. We make the mistake too much of the time of clipping the nails and pulling the teeth of the Plain-Truth-about-Medicine, until what we are willing to tell the people is so insipid they are not especially interested in hearing it.

This article will interest the people. It will grip attention. Trust me for that, and, egad! it will interest you, too. Read it!

Dr. A. T. Still did me the honor to give the proofs of this article a careful and critical reading. I submitted to him whether it be wise or unwise, timely or untimely, profitable or unprofitable to present the truth to the world in this form. I wanted his mature judgment for guidance. I made it plain to him I was willing to submerge my own convictions, alter my editorial position and revise this story if he found a thought or word in it that merited criticism or ought to be changed. He found one thing to change only. That was the date "1873," which should be "1874." With the article as a method of presenting osteopathy to the people and as regards its fairness, moderation and truth, the "Old Doctor" was wholly pleased. I am proud to have him give my views the stamp of unqualified approval. Of course, I would still believe absolutely in the rightness of my position—even if Dr. Still did not agree with me that it was the best course for the profession to take, because *I must believe what I believe*; but I

That is why the osteopathic profession ought to oppose this effort for medical monopoly with uncompromising hostility.

And the best way to oppose it is to carry war into the enemy's country and put them on record before the people for their failures to do for needy mankind what they should do in the hour of peril. In a few certain diseases in which we are sure of our ground, we can narrow the issue and prove our contentions. That will be as effectual for the advancement of osteopathy as proving it in a hundred different diseases. And that will be sufficient—when the people have been awakened to the real facts—to puncture the hollow pretensions of the drug doctors, give them their true relative ratings with the osteopaths, and prevent the federal government giving any more autocratic powers into their selfish, grasping hands.

Do you believe as I do in these issues, doctor?

Are you a militant osteopath or do you consider that the fight has been fought and the war is over?

would gladly modify my action and accept the guidance of his more mature judgment if he thought a different editorial policy were advisable in our educational literature.

I repeat, I am glad he thinks the day of "militant osteopathy" is at hand and that the laity ought to be taught by just such frank and fearless articles.

I hope all the deep thinking and courageous osteopaths will agree with this position.

Dr. Still sounds the keynote to our future when he says:

*"Reformations are the result of an educated laity: therefore, talk to them."*

That's what I do in this February issue of *Osteopathic Health* in the article, "Is the Physician a Death-Watch or a Life-Saver?" I talk to them plainly but moderately and even conservatively, yet the truth is startling, even conservatively put. I tell them about the deaths of Admiral Robley D. Evans and Alfred Tennyson Dickens, son of Charles Dickens, both of whom died in the east only a day apart recently of simple "acute indigestion." I tell them why, in the osteopathic view, both of these deaths seem needless.

I let them know that osteopathy very seldom loses a case of "acute indigestion," and that some of our oldest practitioners never heard of one such fatality under osteopathic care.

I would like to know if you, too, endorse this article and if you believe it is the sort of propaganda that osteopathy should circulate. I would like you to write and *give me your careful opinion*.

Only on two other occasions within twelve years have I written articles for *Osteopathic Health* in this militant vein. Both were on pneumonia. One was when Marshall Field died. The other was when Theodore Thomas died.

I would like you to say whether you believe I would serve the profession well by writing more often this personal kind of argument. Whether I do or do not will depend entirely upon how well the profession receives it and makes use of it?

You must appreciate—as I said editorially once before, some months back—that I can't get anywhere as an editor and publisher, nursing my best inspirations and giving scope to my own views, unless the profession values them and gives them wide circulation. I can't afford to print up big editions just for the pleasure of putting things in print in my own chosen way if the magazines are to be left unused to stock my shelves. They can only do you, me, oste-

## What Doctor A. T. Still Says About the Article "Is the Physician a Death-Watch or a Life-Saver?"

Kirksville, Mo., Jan. 13, 1912.

My Dear Bunting:

After having carefully read the above article, allow me to say that I consider it the truth from start to finish—written by the pen of one who understands human anatomy, physiology, cause, effect and cure of many diseases that the best minds of the medical world have failed to produce remedies for.

I would say reformations are the results of an educated laity; therefore, talk to them. They are interested in but one thing and that is health and happiness.

The book says that when God made man, he said: "Not only good but very good." Was He competent to make such declaration? If so, follow His footsteps. Keep every bone, muscle and nerve in its proper place and the result will be a surprise to the operator, and the answer will be good health. You have told the truth from start to finish.

*A. T. Still*

Kirksville, Mo., Jan. 13th, 1912.  
Dr. H. S. Bunting  
Chicago

Dear Doctor:

By direction of the "Old Doctor" I am returning the article which he received this morning with his signed comment thereon. As you will see he was very much pleased with your idea and position in the matter. He requests that you send him a dozen copies of "Osteopathic Health" as soon as it comes from the press with this article. There is one correction and that is in regard to the birth of osteopathy, which was 1874 instead of '73 as stated.

Fraternally,  
GEO. H. FULTON

## We are Both Working for the Same End

YOU, doctor, by your strict physical examinations must discover the appalling prevalence of spinal troubles and diseases. In your practice, adapted to giving efficient aid in all such cases, doubtless you have discovered the need of some practical appliance designed on scientific principles, as a substitute for the old, cumbersome and painful Plaster, Leather and Starch Jackets, as an adjunct to your treatment of spinal deformities.

We have such an appliance. We ask you to carefully consider our claims of excellence and effectiveness for

## Our No. 1 Appliance

Light and comfortable to wear, easy of adjustment, bringing the desired pressure upon the parts, made only to individual measurements to meet the requirements of each case, from materials of lasting quality, OUR NO. 1 APPLIANCE is the adjunct you need.

"The Sheldon Method of Curing Spinal Curvature" contains a full description, fully illustrated from actual photographs, of Our No. 1 Appliance, in use. Let us send you a copy of this book and other literature bearing upon the subject of Diseases and Disorders of the Spine.

We hope also to interest you in our plan of co-operation with you in reducing the enormous total of sufferers from Spinal troubles which are producing a generation of hunchbacks and cripples. Write to us.

PHILO BURT MFG. CO. 141 13th St., Jamestown, N. Y.



opathy and the people a service when circulated. That's why I am asking you again—as several months back I asked you—to then give me your opinion about the wisdom of preaching that "drugs don't cure." I want your opinion on this article now. Do you like it?

I mean to give you more of such articles as this one from time to time in future, as occasion arises, providing you like to use this kind of stuff. Pray be as candid with me as I am with you. As I said on that other occasion, I most of all want to find out exactly what the profession wants, so that I can supply it.

I shall continue to print my honest views and advice to the profession in the pages of THE OSTEOPATHIC PHYSICIAN, whether I enjoy your approval or not—but, believe me, I am going to put only the sort of matter in *Osteopathic Health* that I know you want, for it is your paper—your medium to send to your patients and your public; and I recognize that whether I am a better judge of what will educate the laity than you are, or whether I am not, you have the right to be supplied with the sort of journal you like and pay for. It's a plain case of business. You're the customer. What's your taste? I cater to your preferences. Please speak your wishes.

But if you want my professional advice as a student of publicity and promotional matters—I tell you without hesitation that this February issue of *Osteopathic Health* will prove about the best piece of educational literature I ever put out for you. You can bank on it.

Of course, the real measure of your appreciation will be the use you make of this article—the order you place—the number of copies you distribute—the application you give to my words in your field. It takes the two of us to educate your community. I cannot accomplish anything without your co-operation.

But this issue is even closer to my heart than my pocketbook, if anything—as much as I like to score success—because I recognize its fundamental importance to the proper advancement of the profession. Therefore, I desire to hear from you personally on the broad question of writing this kind of literature. I want you to give me your approval or criticism, as you think the article deserves. Fire away at me!

Will you please again make use of the ballot provided on this page and answer by a vote of "yes" or "no" after you have read the article. I will send you the article just the minute *Osteopathic Health* for February comes off the press.

Thank you for it.

Your order for February *Osteopathic Health* will likewise be appreciated.

I might add that this article on the "Death Watches" of medicine was written because about 97½ per cent of our practitioners who voted in our former ballot said that we ought to continue to be virile propagationists and teach the world that "drugs don't cure." That emboldened me to preach another such sermon in a different vein—and a much better one. And

I shall be mighty happy if your suffrage authorizes me to keep up this kind of work, for I love it and it is natural for me—as natural to me as for gravity to pull things to earth. It has the approval of my own judgment. I believe it is in line with the tides that help on social progress. And I know it is good for you whether you think so or not.

I gave this article to Dr. Carl McConnel, Dr. Herbert Bernard and Dr. J. M. Littlejohn to read, also. Each approved of it fully. Said it was timely and needed. Do you think so too? Fraternally yours,

HENRY S. BUNTING, D. O.,  
Editor.

## Panama Order Modified

IT is gratifying to note that President Taft has reconsidered his drastic order governing health affairs and medical practice in the Panama zone. The following dispatch from Washington, D. C., to the *Chicago Inter Ocean* explains the situation:

Washington, D. C.—President Taft, who makes the laws for the Panama canal zone, today amended a recent executive order regarding the practice of medicine in the zone so as to explicitly sanction the use of Christian Science and other non-medical methods.

The National League for Medical Freedom, which was organized two years ago, has adopted every honorable means known in its efforts to win the President to its way of thinking, and this action will be regarded as the greatest victory the league has won, although it has succeeded in killing all bills introduced in Congress intended to strengthen the influence and power of the American Medical association.

The Homeopaths, Osteopaths, Christian Scientists and others who make up the league have, it is said, spent \$200,000 in publicity to convince the President and legislators that there should be no monopoly of the practice of healing.

The original order provided that any one who wished to practice medicine, surgery, dentistry, pharmacy or midwifery in the canal zone must be licensed by the board of health.

As modified by the President, the order shall not be construed "to prohibit the practice of the religious tenets of any church in ministering to the sick and suffering by mental or spiritual means without the use of any drug or material remedy, whether gratuitously or for compensation, provided that such sanitary laws, order, rules or regulations as now or hereafter may be in force in said canal zone are complied with." The order as modified takes effect January 1.

## All Osteopathic Physicians, Attention

THE Mississippi Valley Osteopathic Association will hold its annual meeting in connection with the Missouri Osteopathic Association at Kirksville, Mo., during the latter part of May, 1912. A grand program covering three days is being prepared, and all will be assured of an intellectual feast of osteopathy during the entire period. This annual gathering of osteopaths of the Mississippi Valley is also a tribute of love and a "home coming" to our grand old man, Dr. A. T. Still.

It is with thankful hearts that we look forward to being allowed the privilege of meeting the "Pap" of us all once more. Let me urge you all, wherever located, to begin to prepare now, to attend this meeting.

We hope to be able to announce the exact date, and the full program in the next issue of this paper.

Make it a point each day from now on to say to yourself, "I am going to be present at Kirksville, Mo., in May to help all other osteopaths give the founder of osteopathy the grandest and greatest welcome that he has ever had."

Listen! Repeat the above out loud, and don't forget it. Watch in the next issue for the best program that has ever been given.—Fraternally, E. M. Browne, D. O., President M. V. O. A.; W. F. Englehart, D. O., President M. O. A.

Lofty.

"Did he speak in high terms of the doctor?"  
"Yes; he said he charged ten dollars a visit."—*Town Topics.*

DR. HENRY STANHOPE BUNTING,  
Editor, "Osteopathic Health"

I believe that it  $\left\{ \begin{array}{l} \text{is} \\ \text{is not} \end{array} \right\}$  our best policy as a profession to print the sort of articles in our field literature that appears in February "Osteopathic Health" entitled "Is the Physician a Death-Watch or a Life-Saver?"

I  $\left\{ \begin{array}{l} \text{believe} \\ \text{do not believe} \end{array} \right\}$  in "militant osteopathy" and would welcome such editorials for the laity oftener.

Signed:

DATED..... DR.....

## A Great Victory in Canada—Congratulations and Thanks Due to Those Who Fought the Fight

THE following is a brief and accurate account of the legislative fight in the Alberta parliament, between the Alberta Medical association and the Osteopaths of that province, nine in all.

Parliament convened November 30th, and the following day an amendment to the Medical Profession Act of Alberta, passed in 1906, was introduced by Dr. Campbell of Ponoka in behalf of the Medical association of the province. This amendment was an exact duplicate, word for word, of the amendment passed by the medical profession in British Columbia in 1909, which effectually checked the growth and progress of osteopathy in that province, and it is a matter of record that another osteopath has never been able to locate there since the passage of the act of 1909.

Upon December 6th, the osteopaths of Alberta, acting as an organization under the name of the "Alberta Osteopathic Association," had introduced by J. W. Woolf, a prominent member of parliament, a bill legally incorporating the Alberta Osteopathic association, defining the same powers and privileges enjoyed by the Alberta Medical association. Upon the introduction of this bill by the osteopaths to counteract the medical bill a very hot fight was precipitated in parliament as a result, and in order for that body to get at the facts involved in the contention, the Premier resolved the house into practically a committee of the whole to sit two forenoons to take and weigh the evidence presented by both sides that they might be better able to deal judicially with the disposition of the problem thus presenting itself in the controversy between the "medics" and the osteopaths.

The matter was fought out in joint debate during the forenoons of December 13th and 14th, over a period of five hours in all. The principal speakers for the "medics" were two of the officials of their association, Dr. Brett of Banff and Dr. Lafferty of Calgary; and for the osteopaths, Dr. N. L. Sage, formerly of Calgary, now of Edmonton, and Dr. R. C. Ghostley of Edmonton.

To Dr. N. L. Sage must be attributed the most credit for the greatest legislative victory ever won for osteopathy in the British empire, and for that matter in the world. Dr. Sage was formerly a practitioner of medicine in Detroit, Mich., but after graduating in osteopathy from the Kirksville school, came to Calgary about three years ago, where, until recently, he conducted the most successful practice in the province. Because of his age, slightly gray hair and striking personality, in addition to his record as both an osteopath and "medic," he made a clinching impression upon the members of the house by the delivery of a carefully prepared speech, setting forth the failures of medicine in contrast to the success of osteopathy in a similar line of cases as summed up in his own personal experience. Following Dr. Sage, Dr. Ghostley analyzed and condemned the weak features of the amendment to the entire satisfaction of the house. The osteopaths alone were greeted with applause from the committee, and from this moment had won their fight. The "medics" realizing that their amendment could not pass, approached the osteopaths three different times to compromise, and upon the last attempt to compromise with Dr. Sage and Dr. Ghostley present, they granted the demands of the latter in full to save their own association from the wrath of parliament, as some of its members had a bill under creation for the dissolution of the Alberta Medical association, control of the profession to be placed under the university of the province. The compro-

mise resulted in the "medics" losing one of their own dearest privileges, that of holding examinations for its own candidates, its most important privilege.

According to the new law, both the osteopaths and "medics" are to be examined under the university senate, the senate appointing one member from each profession as a member of that body to set examinations and correct same and to look after the general welfare of his particular profession. With this arrangement we obtain for the first time in the history of our profession the recognition and prestige of a state university, declaring to the world under its seal and authority that osteopathy is a sane, intelligent and scientific method of treating disease. All licenses to practice must be granted by the university senate; thus we obtain its prestige, the value of which cannot be estimated in a single thought.

We fought a hard fight, and because of being located in the capitol city and because of taking great personal interest in the battle to be waged, it was my privilege to be on the job quite steadily for a matter of three weeks, as I found it was necessary to watch every move of the enemy, as they tried to trick us three different times in an attempt to railroad their bill through, but due to the intent watchfulness and activity of J. K. Cornwall, M. P. P., a vigorous fighter who kindly took our interests in tow after Mr. Woolf, M. P. P., was called away from the city, their little game was frustrated and after they found we had them tied hand and foot they offered to compromise, and upon the third offer we got together by their granting everything we asked. In fact, it resulted in our getting more than our own bill gone through, as it would not have entitled us to the prestige of the university, and some of the members objected to it upon the ground of its being as bad or worse a closed corporation than the medical association itself. This was true, as is offered upon the advice of a corporation attorney, who stated that it would be impossible for the bill we had prepared to go through because of its form being incorrect as we had copied it from separate board laws of the states. In addition, the fees of \$100 that we were obliged to put up will be returned to us, which is the custom when bills introduced into parliament are not considered by that body. So the "medics," aside from having less privileges themselves, and the osteopaths, having attained to the position of the fullest-fledged osteopaths in the British empire and, in fact, the world, from the standpoint of legislative recognition are having their victory paid for by the M. D.'s themselves. Their chagrin cannot be told in words. They are very quiet these days. This has been a great Christmas present to the osteopaths of Alberta, elsewhere in Canada and throughout the empire. Kindly pass the good word along.

The bill, as agreed upon by osteopaths and "medics" in conference upon third attempt to compromise, was passed by parliament and signed by the Lieutenant Governor upon the evening of December 20th.

Dr. M. E. Church of Calgary was in Edmonton a week assisting in the fight, as did Dr. W. H. Albright, of this city, both rendering valiant service upon the field of action. The papers gave us the leading headlines for three days, and the leading Calgary paper gave us a quarter page editorial in large type.—R. C. Ghostley, D. O., Edmonton, Alberta, Canada.

### Life's Little Indulgences.

Dr. H. F. O—, of Oconto Falls, arrived in the village on Wednesday of last week and has decided to locate here and indulge in the practice of medicine and surgery.—Prairie Farm (Wis.) Breeze.

## Glyco Thymoline



### CATARRHAL CONDITIONS

### NASAL, THROAT INTESTINAL STOMACH, RECTAL AND UTERO-VAGINAL

KRESS & OWEN COMPANY,  
210 Fulton St., New York

### New Model Twentieth Century Hydraulic Treating Table

THE McManis Table Company of Baird, Texas, has produced a new model of the Twentieth Century Treating Table, which embodies radically new features. The table will be ready for the profession in the near future. Some of the striking features of the new table are:

One—Alternating fulcrum controlling depressable leaf.

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Four—Complete universal joint (torsional movement of swinging section; self adjustable).

Five—Elimination of the use of castings, all parts being made of steel.

Six—Simplicity of structure, making possible the use of a plain hydraulic lift of from ten to fifteen inches.

There are other novel and valuable features, and we expect to show an illustration of the table in an early issue with a full description.

### Detroit Convention Will Have Fine Clinical Program

FROM all indications of what is being done at the present time for the coming convention, I want to say that assurances can be given that the Detroit convention will be the "best ever." Speaking for my own committee, I believe we can and will furnish clinic material, the nature of which will be such that it will pay every osteopath in the country to attend. In fact, specific suggestions already received from Dr. Farmer lead me to believe that the program will not only be the most unique but the most practical that we have ever had.

As much and more can be said of all the other committees—they are all working like beavers to accomplish a most successful result.—Dr. T. L. Herroder, Chairman, Clinic Committee.

## Detroit 1912—The Opportunity It Presents and the Crisis That Confronts Us

THERE are many reasons why the Detroit meeting next July should be an unprecedentedly successful one. Most important of these reasons is the fact that as time goes on it is becoming more and more evident that the struggle of the osteopathic profession for its rightful place in the therapeutic world has only begun. Homeopathy is older than we; more closely allied with allopathy; and yet is far from enjoying the same advantages that the latter holds tightly in its grasp.

The situation is not unlike the rivalry of nations. Though peace is longed for, and being daily prophesied, wars go on. Much as we like to think our conflict with "Regularism" at an end, it is plain that our differences are fundamental; that the struggle of our career is confronting us; and that the field of battle has simply widened from the legislative halls of the separate states to the floor of the national congress. Needless to say, too, the issues involved have grown proportionately; and, while we have much to comfort and assure us, there can be no denying that the real and greatest test of our profession's right to recognition as a separate and distinct school of medicine and surgery is about to be made.

It is true that the good in osteopathy, like all truth, must survive. But truth or merit without valiant defenders can be crushed, and osteopathy's day of triumph may be long deferred unless a united and militant profession stands behind it in time of crisis.

The crisis at hand takes the form of a renewed effort to be made this winter by the American Medical Association looking to the creation of a National Health Bureau, under that association's exclusive control. Although this iniquitous proposal has once been defeated in congress, and notwithstanding the assurance of President Taft that nothing in the nature of a "medical monopoly" would be tolerated by the government, a "regular" health board with absolutely autocratic power has just been given control of all health matters in the Panama Canal zone. And this on *President Taft's own order*. It does not require a prophet to see that this is but an entering wedge for a similar institution in the United States, where a mere question of votes will settle it, and where we are hopelessly outnumbered.

But although this is a crisis, and a real peril to osteopathy, it is also osteopathy's supreme opportunity. There should be inaugurated at once a counter movement at Washington similar to that which has won us recognition in our individual states; and this can best be done by seizing on such occasions as next summer's meeting affords for great public demonstrations of strength and scientific efficiency.

Legislative matters will constitute an important part of the program now in course of preparation for the meeting, and it is this phase of the event that is spurring on the Local Arrangements and other committees to the bending of every possible effort. It remains for the profession at large to fully awake to the situation now, and realize the pressing need for vigorous and persistent propaganda.

If we really believe in the pre-eminence of manual over chemical and mechanical agencies, we cannot rest until every avenue of the public health service has been impartially thrown open to our school, and this should be the key-note of the convention of 1912.

The natural attractiveness of Detroit needs no recounting. In this respect, the fame of the city of "The Straits," automobiles, royal baseball "Tigers" and pharmaceutical preparations is international.

## "STANDARD" No. 5 BALL BEARING TABLE

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CHICAGO, ILL.

As a city of drug manufacturing, however, Detroit is a point of special interest to osteopaths. It is a kind of center of the drug industry. More "medicine" is made here than in any other part of the world, and a tour of the various laboratories, with zoölogical annexes, is as much a part of the tourist's itinerary as a visit to Belle Isle Park and Zoo in the beautiful Detroit river.

So a good showing in Detroit on the part of the first, greatest and only "drugless and knifeless" school of healing will command broader notice than could be gained elsewhere, and notice that must tell in a peculiarly forceful way.

Let everyone get ready NOW, for next summer's meeting, and not only arrange to come yourself, but inspire others to come. At the same time, and up to the hour of starting for Detroit, make enough noise around home as will make the opposition at Washington and elsewhere "feel in their bones" the rise and sweep of a mighty osteopathic revival.

Do not imagine that you are not directly and vitally concerned. That idea has often dissipated greater fame and fortune than you are enjoying, however, great you may be. We all need each other and our organization more than ever.

If you have differences, so much the better. It shows you have principles as well; and conventions are nothing more than clearing houses for principles and differences. Bring them along, as you would want your patients to bring their backbones, lesions and all, to your office. Then, and only then, with a truly united profession, can we face Washington and the world with equanimity.

Our fight is not against all who wield pestles and scapels, but against the abuse of these things; and a long suffering humanity is awaiting the complete triumph of our system. Remember this, and remember also your own interests. In republics the right does not always prevail, and when the federal government strikes, it strikes hard.

Dr. Wiley and his brethren are going to use all the popularity gained by the fight on adulterated edibles to enlarge their powers so as to "purge" the country of "irregular doctors," and it will take all the resourceful-

ness of our legislative guides, backed by everyone of us, to stop them.

Detroit and Michigan osteopaths extend a cordial welcome to each and every member of the profession and hope to see the largest attendance in the history of the profession at the Ponchartrain hotel from July 22 to July 27, this year.—*Henry B. Sullivan, D. O.*, Chairman of Arrangements Committee.

## Trouble in Kansas

NOTWITHSTANDING that we have legal recognition in Kansas, the state appears to be a "danger zone" as far as medical oppression and opposition is concerned. The M. D.'s there are making themselves increasingly obnoxious in their attitude towards osteopathy, and they have tried by a new law to wipe out what recognition osteopathy has already received, and apparently right now they are working hard and laying plans to get a law enacted at the next meeting of the State Legislature that will seriously curtail and limit the rights and privileges of osteopathic physicians.

For some reason or other, osteopathy in Kansas does not seem to be making progress with the people, and in influence with the State Legislature, that it should. Reports that have come to us from various practitioners in the State indicate that they feel a weakness. What is the trouble? This is a question of vital importance to the profession as a whole. With the present determined attitude of the M. D.'s in regard to State and National legislation, osteopathy cannot afford to lose legal prestige in any state in the Union.

The case of the persecution of Dr. E. F. Pellette, of Liberal, Kansas, is evidently a part of the plan of the M. D.'s to discredit osteopathy in the State. Some time ago groundless allegations were made against Dr. Pellett of mistreating his children. When the case came up for trial he was acquitted. Now he has been arrested on a charge of manslaughter. We quote the facts as briefly stated in a local paper.

Dr. E. F. Pellette, who was some time ago acquitted of the charge of mistreating his children, was arrested Tuesday afternoon on a charge of manslaughter in the

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fourth degree. He gave bond of \$500 signed by Mr. Church and Mr. Hoskinson for his appearance for preliminary hearing, which will be held December 12th.

On October 4th Mrs. Lelia Bell McNabney was ill, and Dr. Pellette was called to attend the case. Several hours after the birth of the child Mrs. McNabney died. Upon the return of the death certificate to the city clerk, who is now in charge of the vital statistics Dr. Pellette made, a notation which may be said to have implicated Dr. R. T. Nichols, who was called in consultation in the case. The return was in due time returned to the State Board of Health and there given to the statistician of the Board of Health. He, in turn, turned the matter over to the State Board of Medical Registration, which referred the matter back to the State Board of Health, which in due time ordered the county attorney of Seward to make an investigation of the affair. This was done and the warrant for Dr. Pellette was issued. The warrant says in part: "On the fifth day of October, 1911, in Seward county and State of Kansas, one, E. F. Pellette did then and there, unlawfully, feloniously and wrongfully, by his acts and culpable negligence, said acts and culpable negligence not being excusable or justifiable, kill, take the life of and cause to die, Mrs. Lelia Bell McNabney, and the said Mrs. Lelia Bell McNabney did die from the said acts and culpable negligence of said E. F. Pellette on the fifth day of October, A. D., 1911, in the county of Seward and State of Kansas."

Referring to this matter we have a letter from Dr. Charles E. Hulett, of Topeka. He says: "The clipping shows what the M. D.'s are doing to the D. O.'s in Kansas. Dr. Pellette had an M. D. as counsel in this case, but when the difficulty came up the M. D. dropped out of sight. This incident is being made a test case by the M. D.'s with a view to kill osteopathic obstetrics in Kansas. If this case is won by the M. D.'s it will greatly encourage them in the efforts they are putting forth to put the D. O.'s out of business next year. I hope some of our practitioners who think so well of the M. D.'s will see just where osteopathy stands with them when it comes to a legal contest. I have some M. D. friends who don't mind my doing a little practice, but not one of them believes the osteopathic theory. The Secretary of the Registration Board was in my office and urged me to secure the help of the osteopaths of Kansas in driving out the chiropractics. Of course we object to the chiropractics because they are uneducated, but this solicitation of our help by the M. D.'s is simply part of a scheme to be used against osteopathy itself, later.

"I believe that we should have some help from the offices of the American Osteopathic Association in this matter, as I am confident that if the M. D.'s win this case against Dr. Pellette it will mean the end of D. O.'s being recognized as physicians in the homes in Kansas. We need good lawyers to fight this suit, and we need money to pay them. We are doing all we can, but we cannot do enough."

If Kansas really needs outside help, we certainly hope that it will be provided, but in contrast to the situation in Kansas, look at what has recently been accomplished in Colorado and in Alberta, Canada. In this issue we publish an account of the complete victory won for osteopathy in Alberta Province by eight pioneer practitioners. In Colorado they have had many set-backs and discouragements, but they have never lost their fighting nerve, and in our October issue we reported a victory in the Supreme Court, it being held that osteopaths in Colorado had the full right to practice and the privilege of using the title "Doctor." The osteopaths of Colorado are now getting ready to make a tremendous campaign for a law governing the practice of osteopathy in their state and establishing an Independent Board of Examination and Registration. As a part of their work, they are taking up strong educational campaigns with popular literature, and in this they are showing great perspicacity and foresight. The influence and desire of the people is something we must have on our side if we want to win in these legislative contests. Literature can be effectively used on the members of the State Legislature themselves. It also can be sent to judges and lawyers with good results. Get these kind of men acquainted with osteopathy

and what it stands for and they will admit the justice of our position in asking for legal protection and recognition. Dr. N. L. Sage, who was so instrumental in helping to win the victory in Alberta Province realized and appreciated the value of this educational work, and immediately after getting settled in the Province he started a vigorous campaign of education both among the general public and among the State Legislators and among the judges, lawyers and officials.

The members of the American Osteopathic Association and the profession as a whole should work as a unit to support and protect the interests of osteopathy in any section where it may be attacked in a particularly vigorous manner, and where there may be any weakness locally, but, at the same time, much responsibility devolves upon local State Associations and it looks as if possibly our practitioners in the State of Kansas are not living up to the height of their privileges and opportunities. They should get together and organize a systematic campaign of education and publicity to be conducted among the members of their State Legislature, among the judiciary, as well as among the prominent lawyers and men of affairs generally. Furthermore, each individual practitioner should see to it that he takes care of the education of the laity in his community. Let patients and friends understand that efforts are being made to curtail the progress and development of osteopathy by means of adverse legal enactments, and get them to use, wherever possible, their influence against any such action. Osteopathy is understood and appreciated by thousands and thousands in Kansas. If their influence and loyalty is utilized and the work of general education extended the M. D.'s will never succeed in driving osteopathy out of the State.

### Plan Big Meeting at Baltimore

THE Maryland and Baltimore City Osteopathic Associations are actively engaged in a campaign for a meeting to be held in Baltimore on Saturday, February 17th, at the new Hotel Emerson. It is our purpose to make this meeting most interesting and helpful to the profession and at the same time to educate, to a greater extent, the laymen of our city and state, many of whom we are expecting to attend.

We feel Maryland has been very backward in her recognition and acceptance of osteopathy on account of lack of publicity, and we know of no better way of bringing it before the public than by a big meeting of the nature we are planning.

The afternoon session from three to five will be devoted entirely to scientific subjects. We expect to have such speakers and educators as Dr. O. J. Snyder, Dr. Charles Hazard, and others, to address us.

A sumptuous banquet will be given at 7:30 p. m. at which many prominent men of Baltimore and Washington will speak. We wish to extend a most cordial invitation to all members of the profession and their friends to attend this meeting. It will be good to get away for a little trip and it will do us all good to get together in a rousing osteopathic atmosphere; by coming to this meeting you will not only be benefiting yourself and us, but you will be pushing the cause of osteopathy, for we are yet without osteopathic legislation in Maryland and we need a good lively meeting to prove to the people of Maryland that our cause is a worthy one.

Now we urge you to come and be with us at this meeting. The plates for the banquet will be \$3.50 per person. Reservations must be made not later than February 1st, 1912; don't delay making your reservation, for the number will be limited, so send in your name at once to Dr. Harrison McMains, 917 Fidelity

Bldg., and the necessary provisions will be made.—Committee: Harrison McMains, *chairman*; Aloha M. Kirkpatrick, Howard M. Houck, H. Alfred Leonard, Henry A. McMains, *secretary*.

### Another Crook Trying to "Work" Osteopaths

LOOK out for a fellow claiming to be some D. O. in a distant state and soliciting railroad fare home. One called on me, claiming to be Dr. Breedlove, of Valdosta, Ga. I gave the fellow fifty cents and wrote Dr. Breedlove. He answered by return mail and confirmed my suspicion that he was a clever crook. He answers most perfectly the following description. Five feet eight inches tall; 145 pounds; hair dark, and fully one-third gray, but only a small amount on top of his head; he is decidedly Jewish in both accent and appearance, but claims to be French; has asthma, which is noticeable in his speech. When here he wore dark clothes and short black overcoat. If he calls on you, give him small amount, have him arrested, and telegraph the fellow he claims to be. He registered here at hotel as L. M. Marion, Atlanta, Ga. If necessary for evidence, telegraph Dr. D. H. Breedlove, Valdosta, Ga., or the undersigned.—*J. Meek Wolfe, D. O., Lynchburg, Va.*

### Some Vigorous Action Necessary

A LARGE number of the old line and fraternal insurance companies continue in their persistent and arbitrary attitude toward osteopathic practitioners. They refuse to accept the signature of our practitioners to examinations even though osteopathy is legally recognized in the state in which they are doing business. This attitude of the insurance companies is a direct blow at our prestige and our practice and it should not be tolerated. A late incident has been called to our attention by Dr. M. B. Harris of Amarillo, Texas. He recently made three examinations for an agent of the Southland Insurance company, of Dallas, Texas, intending to also take insurance with them. The examinations signed by him were refused by the company on account of his being an osteopath and not because of any error. Dr. Harris has made examinations for several years for other companies, including the Missouri State Life company of St. Louis.

From previous experiences, we are convinced that the insurance companies will not pay any attention to individual protest. We suggest that some strong old line insurance company, doing a large interstate business and recognizing osteopathic examinations, be selected and receive the endorsement of the osteopathic profession, and that as many as possible of our practitioners take out policies with the company selected and secure from the company and keep on file in their office application blanks and informative literature, and that they recommend this company to their patients and friends whenever opportunity may arise.

By co-operative work of this kind, we can influence a tremendous amount of business for one company, and when other companies see that we are in earnest in this matter they will soon make arrangements to accept our examination papers. Those members of the profession who adopt this suggestion should keep a record of policies they know to be placed through their influence and from time to time a list can be published in THE OSTEOPATHIC PHYSICIAN and copy forwarded to the leading insurance companies. We should be glad to have correspondence and suggestions on this proposition. The insurance companies are constantly belittling us before the general public and it is certainly time that some definite and concerted action was adopted.



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## Editorial

*Fairness! Freedom! Fearlessness!*  
*"Hew to the line, let chips fall where they will"*

VOL. XXI. JANUARY, 1912. No. 1

### THE ALBERTA VICTORY.

In another part of this issue we print a report of the splendid victory won for osteopathy by a small body of osteopathic practitioners in Alberta Province, Canada. The quiet, efficient, preliminary work done in this contest, as well as the complete recognition secured, are worthy of much credit and praise. We extend our thanks and congratulations to this little band of pioneers who have had the foresight, courage and ability to put osteopathy on a safe and firm foundation in Alberta right at the start. Alberta is an empire in itself, and, thanks to the good work just accomplished, it presents an almost unlimited field for the future growth and development of osteopathy. Right now there are many good openings there, and by the enactment of the new law, osteopaths in the United States can locate there with the full assurance that they will be received in a friendly way and enjoy proper legal protection and recognition.

This victory in Alberta should also encourage our practitioners in British Columbia and in Ontario and other parts of the Dominion to renew their efforts for broader recognition, and to secure laws that will give osteopathy a fair chance to progress and develop.

### PERSISTENT PERSECUTION.

The frequent prosecutions brought against Dr. E. F. Pellette, of Liberal, Kansas, have attracted attention all over the state. The *St. Louis Republic* of January 7 printed a five-inch dispatch from Liberal on the subject, under the regular display head. Attempts to damage Dr. Pellette's practice and reputation have been so persistent that there is no reasonable room to doubt but what they are inspired by a desire to discredit and work injury to the cause of osteopathy in Kansas, and Dr. Pellette has simply been selected as a victim. Should any of the suits brought against him prove successful, or should Dr. Pellette, as a result of them, be driven out of Liberal, it doubtless would be a short time before similar attacks would be made on some osteopathic

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physician in another town. We hope to see Dr. Pellette's persecutors thoroughly discredited in this case, so that they will not attempt anything of the kind against him or against any other osteopath in the future.

### AN INTERESTING QUOTATION.

The following quotation taken from the October 28th number of the *Medical Record* is interesting as revealing the change of attitude and viewpoint that is coming over the medical profession and being more and more strongly expressed in their periodicals, but which as yet they are not willing to frankly admit to the general public:

"Medicine of today is remote from being an exact science, but it is slowly moving toward this goal. It is greedily appropriating as its own the conquest in physics, chemistry, and mechanics, and is fully armed with the experimental methods that have placed the latter upon a high plane. The subjugation of disease which future generations will behold will be the outcome of a scientific warfare, in which every plan of battle will be carefully drawn and in which the strength of the enemy will be accurately known. Trained sanitarians will constitute the engineering corps of this conquering army.

### IT IS A "SLY METHOD."

Editor THE OSTEOPATHIC PHYSICIAN: The following digest of an article published in the *Boston Medical and Surgical Journal*, November 16th, speaks for itself:

Sciatica.—Rogers says that practically every case of sciatica is caused by some lesion near the exit of the sciatic nerve, and that the pain and tenderness along the course of the nerve are simply referred pain from the low portion of the back. In order to properly treat sciatica, it is necessary to search for the cause of the trouble, which is either a mechanical pressure or inflammatory irritation at the origin of the nerve. If we find that there is some lesion in the lower portion of the back as the cause of the sciatic pain, then the ordinary methods of local treatment and the use of rheumatic remedies, except to relieve pain or to have an effect on some rheumatic process affecting the lower portion of the spine, is irrational and is not in accord with the pathological findings.

Emerson somewhere ascribes all praise and credit to a man who has discovered some truth for himself, even though all the world knew it before.

I, too, say, if Dr. Rogers really discovered this truth he is to be commended for giving his collaborators the benefit of his knowledge, but someone may be skeptical enough to suggest that this well-known principle may have percolated into the doctor's head through some osteopathic publication.

The point I wish to suggest is this: Will not the medical profession be ready to accept the new truth, now that it comes from an orthodox source, and is this not one more instance of their sly methods of absorbing osteopathy without giving credit where it is due?—J. E. Hodgson, D. O., Spokane, Washington.

### CONCERNING ADVICE ON OPERATIONS.

Editor, THE OSTEOPATHIC PHYSICIAN: The *Journal A. M. A.* for May 6, 1911, page 1365 contains this "PERMISSION TO OPERATE ON MINORS.—The French law gives parents and guardians the right to forbid operations on minors and the insane, and Picque cites examples to show the evils resulting from this law, as for instance when the father of a girl between 20 and 21 refused to permit the amputation of her leg on account of a sarcoma of the lower end of the femur, declaring that he preferred death to amputation for his daughter, notwithstanding the girl's agonized appeals for the operation. He also cites instances in which the family refused to permit a needed operation on an insane member of the family, their refusal often being dictated by sordid or criminal motives. (Of course, Dr. (?) Picque was piqued; he may have just lost at a game of picquet and as the following indicates he had failed to get his desire in

legislation, perhaps, a place in the cabinet of the president of the French republic, and this would make his gratuitous insult to the relatives of the insane more tolerable if not less contemptible, when he says their refusal was "dictated by sordid or criminal motives." How did he ascertain their motives?) Picque describes his efforts to influence legislation to correct such deplorable conditions, but he has been unable to accomplish anything to date in this line."

The following is the first article on the very next page and as Picque fails to give the result of the failure to operate in the sarcoma case we can make no comparison but there must have been 'obvious reasons' for not giving this information.

SARCOMA OF THE CALCANEUM.—"Stern has encountered two cases; the patients were men of 54 and 28 and the growth was inoperable in the first case. In the other the trouble had been supposed to be of an inflammatory nature and a plaster cast was applied four weeks after the first symptoms. The increase in the pains compelled its removal in ten days when the ankle was found more swollen than at first and the patient refused to permit massage. The progress of the growth soon required amputation of the leg and the man died of metastasis in a few months."

In this matter of operations the patient or his guardian must use his intelligence the same in dealing with a physician as in dealing with a merchant or land agent, that is, he must think at all times for himself and not give his entire consent to every suggestion the physician may make, even when contrary to every known law of experience or of science. Only a short time since a patient told me that two members of three in the family would be each minus a leg if the physician's advice had prevailed.—S. S. Still D. O., Des Moines, Ia., January 4th.

**Dr. Herbert Bernard  
says one million  
copies ought to  
be circulated**

Detroit, Jan. 13, 1912

Dr. Bunting:

Your proofs of article entitled "Is the Physician a Death-Watch or a Life-Saver?" received. I have read it with absorbing interest. I endorse your stand thoroughly and want to say that it is the best article I ever read on osteopathy.

I think we should have an outlined plan to inform people where we stand on these mistakes of the medical fraternity. Acute indigestion is one of the easiest things an osteopath has to handle.

There ought to be a million copies of this article circulated.

Fraternally yours,

*Herbert Bernard, D. O.*

## Hard Nuts Cracked for Puzzled Practitioners

Conducted by Herbert Bernard, D. O., Fine Arts Building, Detroit, Mich.

### A Stubborn Case of Eczema.

*Editor THE OSTEOPATHIC PHYSICIAN:* While looking over the part of your paper where the "Hard Nuts" are cracked, I concluded to put the hardest nut that I have encountered in the past five years before you and see if you have any suggestions that will be helpful. For the past five winters I have been bothered with eczema of the hands and wrists. The pimples, then papules, appear with the first cold blast from the north, and are present at all times until the warm breezes of spring come. I have gone through the regular course of treatment from cuticura, oxide of zinc, blue ointment, and Fowler's solution down to the application of the X-ray, and to date have found nothing that would give relief for any length of time. I know that there is an osseous lesion between the second and third dorsal, but after having it worked on for three years while in school I concluded that it was not reducible, so reverted back to the dope route. Some will say that the fault lies in the digestive tract. I can say for this that nobody has a better digestion. Everything is taken care of nicely. Bowel movement daily. If digestive disturbance, why no trouble with the hands in warm weather? If due to lesion (bony), why not trouble continuously? If there is anyone in the profession who can recommend an application that will keep this condition down, I will consider it a "Hard Nut Cracked."—L. H. Bell, D. O., Story City, Iowa.

\* \* \*

In *The Osteopathic Physician* for November Dr. William F. Wurth, of Fairbury, Neb., asks that I give a definition of my saying "that it is my belief that every problem of diagnosis and treatment can be answered osteopathically in terms which do not violate one well established fact or principle of science." I wish to inform the Doctor that it is to explain this very thing that this department was started, and if he will ask me a question, or many questions, if he so wishes, I will try to answer him in language compatible with the mechanism of anatomy in its relation to osteopathy and without advising one adjunct.

In the same issue of *The Osteopathic Physician* Dr. Ernest E. Tucker gave the profession a very valuable point in his explanation of how a lesion may recur through the weakening of ligaments. This is what we want; let the profession get together and argue out these very important questions. In this way it may be that some day all the practitioners of osteopathy will know just what is claimed for osteopathy. And again we may be able then to write a text-book on osteopathy.

I wish to inform Dr. H. Alfred Leonard, of Baltimore, that I understood his question at first, or at least I thought I did. However, I will give the same answer to his revised question in the December issue that I gave in the November issue answering his question of October.

Regarding the question in this issue of Dr. L. H. Bell, of Story City, Iowa, as to his case of eczema of the hands and wrists: Judging from his letter he has used everything in the therapeutic world without relief. He tells us that his digestion is all right, but that there is a bony lesion between the second and third dorsal. Let me remind Dr. Bell that at this part of the dorsal region we have one of the

most important vaso-motor centers in the body and his trouble is evidently circulatory. In proof of this is the fact that only in winter when the cold weather has a tendency to contract surface blood vessels is the time when the eczema shows. If the nerve control of the blood vessels was in harmony there would be perfect accommodation to cold and heat through this very delicate nervous mechanism of the peripheral vessels. In warm weather the action is normal, or near normal, on account of the relaxation of the warmth in the atmosphere.

Has the Doctor had that lesion worked on long enough and persistent enough to be sure that it cannot be reduced? If I were he I would continue the work—even if I did take a three-year treatment once.—Herbert Bernard, D. O.

### "What I Have Found Out"

This is another new department we hope will prove of permanent interest. In the course of years of practice every osteopath discovers methods and means that prove of considerable aid in his or her work. Now here's an opportunity to tell "What You Have Found Out," for the benefit of others. We shall be pleased to receive short contributions for this department.

I HAVE found out that in an astonishingly large per cent of cases of severe constipation there is an ulcerated sigmoid with consequent partial stricture. Homeopaths in this city using the Pratt treatment introduce lanoline into the sigmoid by the aid of a speculum and a probe, but this is quite painful. Dr. J. B. Bemis, D. O., called the attention of the M. S. O. A. to Eucaloform Ointment put up by Conger Bros. of this city and this application by means of which I have won out in many desperate cases that I do not think I could have done by other methods. The Eucaloform Ointment consists of lanoline, golden seal and eucalyptus, put up in such a way that after slight warming it can be forced into the sigmoid by the applicator, which is a sort of an air gun and colon tube. Sometimes it is difficult to keep the tube from curling up in the rectum.

With the sigmoid stricture the caliber of the stool is greatly lessened. It is often thin like a ribbon, and frequently the patient cannot evacuate the bowels until after he has taken a cathartic that liquefies the bowel contents. The stricture is often indicated by tenderness in the sigmoid and by difficulty in inserting the colon tube. As a rule also in case of a sigmoid ulcer, the patient finds great difficulty in securing satisfactory results from enemas. After application of the ointment every other day for a period varying from two weeks to three months, the constipation disappears, and the caliber of the stool becomes normal.—C. W. Young, D. O., St. Paul, Minn.

### Interesting Multiple Pregnancy Cases\*

By Lola D. Taylor, D. O., Des Moines, Iowa.

A SHORT time ago Dr. Fike asked me to assist with this evening's program by telling you about some interesting obstetrical cases. To me all obstetrical cases are interesting. I was a little perplexed to decide which of our cases might be interesting to you. During the following thirteen days, eleven babies were cared for by Des Moines Still College. From that number I have chosen two cases which are of rare occurrence, hence, of unusual interest. One is a case of twins and the other of triplets.

#### Case of Twin Pregnancy.

Mrs. H., age thirty-six, mother of four children. Mrs. H. was cared for by the college clinic during her last confinement, April, 1910, eighteen months ago. Her previous labors have

\*Read before the Seventh District Association of Iowa.

been short and comparatively easy. No history of multiple pregnancy in either her family or that of her husband could be obtained.

I examined her about a month previous to the birth of the twins. At that time the abdominal enlargement was very great. It was also pendulous and tense. A multiplicity of small parts was noted. The position was not diagnosed. The foetal heart could not be found. The patient was placed in charge of a student and the usual preliminary treatment given during the next month. During the last week the abdomen was supported by an abdominal bandage.

On October 16th the patient called the student who had charge of her case. She gave him this history: She had suffered all day with what she called "nagging pains." They occurred in groups of two or three every fifteen minutes. They were not severe.

An examination was made. On abdominal palpation a multiplicity of small parts was noted over the front of the abdomen. A definite back was outlined on the left side and anterior, but the confusing point was obtaining a foetal heart on the right side, while the back was on the left.

On vaginal examination, the vulva was found to be somewhat swollen; the labia were widely separated. The vaginal walls were lax. The cervical canal was obliterated and the external os dilated sufficiently to admit two fingers. The presentation was recognized as vertex; the membranes were intact. This examination was made about nine p. m. The student remained with the patient five hours. During this time the pains continued much as they had been during the day, not responding to frequent stimulating treatment. The patient rested well between pains.

Another vaginal examination was made, and, as but little progress had been made, the student returned home, leaving instructions to be called as soon as pains increased. The second call came October 18th, three-forty p. m., forty-two hours after the first call. She said that during this time the pains had continued about the same at intervals of fifteen to thirty minutes until thirty they became of an expulsive character.

When the students and I arrived, we found her suffering with strong expulsive pains, three or four minutes apart. I urged her not to bear down with the pains, but to cry out or pant for breath until we could make some preparation for the delivery. She seemed to be able to control them partially for a time. While one student was putting on his rubber gloves over non-sterile hands, a procedure which is not ordinarily permitted, another was preparing solutions of soap and water and bichloride. Another got out the towels, leggings, instruments, etc., and put the latter on to boil. The bed, fortunately, was already prepared, and the patient had had a bath and clean gown, thanks to the forethought of a neighbor.

When the student's gloves were ready, we permitted the patient to use her pains and between the pains we washed the vulva with bichloride; no time was taken for abdominal or vaginal examination. At four-forty, an hour after we were called, the membrane ruptured spontaneously, and in less than five minutes the first child was born; L. O. A. position.

The child was so small and the abdomen still so large that we immediately searched for another baby and we were rewarded by finding it. The back was on the right, small parts on the left, head down, foetal heart on right, on level of navel, or in other words an R. O. A.

The pains ceased for a time after the first child was born, but in a few minutes they began again, at first light, gradually increasing in strength. In ten minutes the membranes ruptured spontaneously, and five minutes later the head appeared, and was born fifteen minutes after the first child.

The first baby was a boy, six pounds, and the second was a girl, six and three-quarter pounds. Both were in good condition and have remained so up to the present time. The placentae were born together about a half-hour after the last

child. The placentae were separate but the chorions were adhered.

The mother lost more than the usual amount of blood following the delivery of the placentae and about four hours later suffered with severe afterpains. The latter is not surprising when the conditions are considered. Otherwise her recovery has been uneventful.

The delay in dilatation in this case, I think, was due to inertia which was caused by the frequently repeated pregnancies, the pendulous abdomen and the over distension due to the multiple pregnancy.

#### Case of (Multiple) Triple Pregnancy.

The morning of September 25, 1911, a former clinic obstetrical patient called and asked if our clinic could care for a neighbor during confinement. I told her we could, and as she was expecting to need us soon, I planned to make the preliminary examination as soon as possible. In the afternoon she called again, asking me to come immediately, as the patient was apparently in labor. I could not leave immediately, but sent one of the seniors who has had a great deal of obstetrical experience in our clinic, having delivered ten babies and assisted with the care of twenty-one.

He found the patient, a Mrs. O., who gave him the following history. Her age was twenty-nine years. Had been married eight years. This was her fifth pregnancy. Her first child, a seven-months' baby, lived only five weeks. Her second died at three months of age. The third child died of pneumonia when two weeks old. The fourth, a boy, two and one-half years, is living and in good health. All the children were in good condition at birth. Her health had always been good during her pregnancies and her labors comparatively short and easy. The first occupied about eighteen hours and the fourth only two hours.

The student found the patient suffering some pain, but not hard, just a bearing down sensation. On abdominal examination the information obtained was not satisfactory, at least it was different from the ordinary case. In reporting to me about the patient the student said: "I wish you could see her. There is something peculiar about that case." The abdomen was distended and tense. There seemed to be a back across the pelvis and directed downward. There was a multiplicity of small parts over the fundus. Could make out only one back and could not locate the head definitely. Two foetal hearts could be heard distinctly, in two locations and entirely separate from each other. The rate was also different: one, one hundred forty-four; the other, one hundred fifty-six. But the confusing point was that both hearts were heard on the same side. One was located just above Poupert's ligament, and the other above and to the right of the navel. On vaginal examination, the cervix was found not to be dilated to any extent. The presenting part was not made out. In fact, the student said there didn't seem to be anything in the pelvis.

A Deaconess, who was present, kindly offered to watch the patient and report progress during the evening. She reported at nine p. m. and again at eleven p. m. Very little change was made in the patient's condition, but the Deaconess felt timid about remaining over night at the house alone and urged me to send one of the students out to stay with her. I sent two out on the last car. They stayed until morning. No progress, although stimulating treatment was given to bring on the pains. As the patient was resting well between pains the students returned, leaving word to call us again as soon as we were needed. We did not again hear from the patient until October 12th, seventeen days after our first call. (I wish to explain what may seem neglect during this time. The patient lives at Sixteenth and Edison avenue, three-fourths of a mile from a car line which has a twenty minute service, and four or five miles from the College. Hence our reluctance about making unnecessary calls.)

The Deaconess called us October 12th and re-

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ported the patient as not at all well. During this seventeen days she had suffered with a bearing down pain and had remained in bed most of the time. I arranged to call the next morning, but during the night we received a "hurry up" call. We called a carriage and arrived at the home of the patient about two a. m. We were met in the yard by the husband who announced that one baby had arrived, but that there was another unborn. We dismissed the cabman and hurried into the house. Found the mother and child in good condition. The cord had not been cut. So while one student sterilized scissors and hemostats in lysol, another quickly scrubbed his hands to cut the cord. After this had been done the youngster was oiled and put aside to wait for the next one.

As soon as we could scrub our hands and prepare the patient a vaginal examination was made. The cervix was well dilated but somewhat oedematous and exceedingly tender. The vulva and vagina were also hypersensitive. The presenting part was high, the membranes were not ruptured, and so I felt a little uncertain about what the presenting part was. It was hard, like the head, but a small part was also presenting. Later on as the part advanced we determined that the head was presenting, with an arm directly over the top of the head. The pains were regular, but not much of the expulsive character. About four o'clock the patient cried out with a severe pain in the left side, located above and internal to the anterior superior spine of the ilium. It was not like a labor pain. She complained of it bitterly, and the pain continued so long and so constantly that in spite of the fact that the labor pains had not been severe enough to indicate it I could not help fearing rupture of the uterus.

I immediately anesthetized her (partially) and ruptured the membranes. I tried to push the head out of the pelvis to release the arm, and if it continued to bother I expected to do a podalic version. After working a short time I

asked the student who was scrubbed up to assist to make an examination of the condition and try to push the head out of the pelvis. He partially succeeded. In a few minutes head was born, with the hand beside the temple. The body followed quickly. The child was small, and the mother's abdomen remained so large we directed one of the students to examine for the presence of another. With an astonished exclamation he declared there was. I verified his diagnosis, then gently massaged the uterus to stimulate contraction. While waiting to see what this third youngster would do, I wondered how much hemorrhage was going on behind those two placentae belonging to the two babies already born.

On making a vaginal examination the student reported a vertex presentation. I did not examine. The third set of membranes soon ruptured spontaneously and after a few expulsive pains the third youngster was born. The position was a right occiput posterior and instead of rotating anteriorly, as is customary in ninety-seven per cent of these cases, it rotated posteriorly and was born thus, the occiput slipping over the perineum, and the face slipping down under the symphysis without the least difficulty. As you know, this is considered one of the very difficult presentations, but owing to the distension produced by the first two babies and to the small size of the child, no difficulty whatever was encountered.

The first child presented by a single foot, and was born with one leg extended and the other flexed. There was a single placenta, with three separate sets of membranes. The three cords were each attach at the edges. The placenta came away spontaneously about thirty minutes after the third child was born. The mother passed through an uneventful puerperium. Since the birth of the first child she had been unable to nurse her babies from one breast, because of its failure to secrete milk. But nature came to her rescue when the triplets arrived, and she is now able to use both breasts. The babies were all alive when born but did not seem very strong. One weighed four and three-fourths pounds and the others each weighed four pounds. One died about twelve hours later. The others are living and in good condition.

I wish those of you who have always been fortunate enough to practice only among the well-to-do could have the privilege of visiting this home, in order that you might appreciate some of the difficulties under which we work. This picture, poor as it represents the house, does not do justice to its poverty. The house originally had two rooms, but the one you see on the right has almost disappeared, the roof and floor, with a few upright supports, only remaining. The other room, and in which the patient lives, is about ten by twelve feet. It contains a bed, dresser, cook stove, cupboard, table, one rocker, three chairs, one without back and one without the cane seat which it once possessed. The walls had a variety of decorations, a few patches of wall paper, bare plaster, and bare lath. We kept the stove hot in order to sterilize water. The room was quite full when occupied by the furniture mentioned, four students, the husband, three neighbor women and myself.

In addition to the calls which our students make once a day for ten days, the mother and babies have been cared for by daily visits from either a Deaconess or a nurse from the Visiting Nurses' Association.

#### Dr. E. M. Browne Takes Over Galesburg Practice.

Dr. R. S. Halladay, of Galesburg, Ill., who has been in active practice there for a number of years and built up one of the strongest connections in the city, retired from active practice the first of the year and intends to enjoy a well earned leisure for the rest of his days. Dr. E. M. Browne, who has been associated with Dr. Halladay for some time past, has purchased the practice and succeeded to the connection in his own name the first of the year. Dr. Browne is so well known throughout the country, particularly for his long and unselfish labors in connection with the Illinois Osteopathic Association, that we are sure that he will have the good wishes of the profession in taking over this practice, and we certainly wish him all the prosperity and success to which he is so highly entitled.

### The Wisconsin Column

IT IS now eight months since we have been having the privilege of this column. Has it been appreciated? Now, answer either one way or the other, please, as your reply will be a criterion for later action as to whether the same is continued another year. When this column was proposed, it was with the thought that it would be used for the purpose of stimulating original thought and research, as well as keeping up a spirit of intercourse which might be beneficial toward a closer relationship among the members of the association. Has it accomplished any of these purposes? Do you, personally, feel that the column has been a help to you? Has it tended to keep you in closer touch with the individual members and made you feel as though you were a part of an organization which stood for something?

Please apply these questions to yourself, as a member of the state association, and give the officers some assurance that you do or do not care for the continuation of this column. Take the contents of this paragraph and consider it a personal letter to every member, and reply at your earliest opportunity, addressing the same to the secretary. The earnestness with which this request is taken and applied will have much to do with the future efforts of this nature.

\* \* \*

Another reason for the starting of this column, and the subscription to THE OSTEOPATHIC PHYSICIAN furnished gratuitously to members for a period of one year, was, with the expectation that such a plan would stimulate non-members to join. This has not proven to be the case, and it seems very evident that those who are not members either do not feel that the association is worthy of support or that membership with these privileges added does not enhance the value of membership. This is to be regretted, because it would seem to those who have been identified with association work for a number of years and appreciate what it means to be a member of an organization—it means money well invested. What we need more, as members, is a greater feeling of unanimity with that spirit of fraternalism which goes to make up the success of any organization. In other words, we ought to unitedly make desperate efforts to have every person a member of the state and national associations who is worthy of such membership. It has been somewhat of a disappointment to the special committee on solicitation of memberships that more applications have not come in, and while they are yet working to secure all the others as members, each of you may do something towards helping them. You know by the directories who is and who is not a member. If a non-member would receive a letter from every member of the association urging membership it would, I believe, have quite an effect upon that person. It will do no harm for every member to sit down this minute and write a letter to every non-member and set forth the reasons why he or she should become a member of the associations. As a member, you are not doing your duty until this is done. A special committee is all right, but they alone cannot do it all.

\* \* \*

Dr. Harriet A. Whitehead, Wasau, is spending the winter in the South, taking a much needed rest and recreation, after ten years of continuous practice. Dr. Nellie Fisher, of Wauwatosa, will take charge of Dr. Whitehead's office while the latter is away, and Dr. Calla Canright will assume Dr. Fisher's practice.

Dr. Eliza Culbertson will act as temporary treasurer during Dr. Whitehead's absence, and all moneys due on account of delinquent dues or assessments should be sent to Dr. Culbertson, Appleton.

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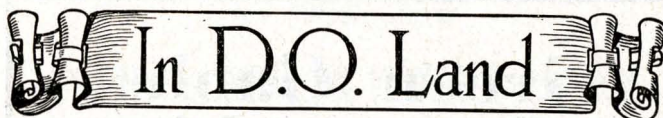
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#### California Board Examinations.

On December 5th nineteen osteopaths appeared before the California State Board of Medicine for examination. Ten were successful.

#### Iowa First District Meeting.

The First District Iowa Osteopathic Association held a meeting December 5th at Waterloo. The morning was devoted to clinics and discussions, and in the afternoon Dr. T. C. Stephenson of Cedar Falls spoke on "Publicity," and Dr. Liffing on "Appendicitis."

#### New England Meeting in May.

The eighth annual meeting of the New England Osteopathic Association will be held at the Hotel Vendome, Boston, May 24th and 25th. Scientific programs will be given each day, followed by a banquet on the last day, at which prominent speakers will make addresses.

#### Nebraska Mid-Year Examinations.

The Nebraska Board of Osteopathic Examiners will conduct the mid-year examinations at the capitol at Lincoln on Tuesday and Wednesday, February 6th and 7th. All communications should be addressed to the secretary, Dr. C. B. Atzen, Omaha.

#### Osteopathic Literature in German.

Dr. T. L. Herroder, of 212 Stevens Building, Detroit, Mich., now has ready a new edition of his Osteopathic Educational Literature, printed in German. A half-tone of the "Old Doctor" appears on the inside cover page. The cost of the magazines will be \$3.00 a hundred, plus express charges.

#### Northeastern Pennsylvania Meeting.

The Northeastern Pennsylvania Osteopathic Association held its regular monthly meeting December 15th at Wilkesbarre. Officers elected were: President, Dr. Mathew C. O'Brien, Pittston; vice-president, Dr. Sidney Cresswell, Scranton; secretary and treasurer, Dr. A. May Benedict, Scranton.

#### A. T. Still Association Meeting.

The A. T. Still Osteopathic Association of Massachusetts met at the office of Dr. Sidney A. Ellis of Boston for its December meeting on the 21st. A case of cretinism and one of bradycardia were present. Both were interesting cases and there was a discussion of them. The legislative committee reported progress.

#### King County (Washington) Association Meeting.

The December meeting of the King County (Washington) Osteopathic Association was well attended. Dr. J. W. Murphy presented a most excellent paper on "Osteopathic Treatment of Tonsils and Adenoids." Dr. F. J. Feidler had a question box, and Dr. E. G. Rickart had a clinic to demonstrate the best methods of reducing cervical lesions.

#### New College Journal at Des Moines.

Number 1, Volume 1, dated January, 1912, of the Des Moines Still College Journal of Osteopathy has just been

issued. The book contains forty-eight pages, and is neatly printed and bound. It contains some good articles and appropriate information. Des Moines Still College of Osteopathy seems determined to make itself a success and progress, and it has our good wishes.

#### Expresses Gratitude for Help in Sickness.

Dr. E. W. Robson, of the Hotel Le Marquis, New York City, has just recovered from a severe attack of botulism. He writes us that he is convinced that he owes his present existence to the faithful care of Dr. Chas. S. Green, and the patient nursing of his wife, who gave him most constant attention, and he entertains feelings of most sincere gratitude for the conscientious services of Dr. Green and the excellent nursing of Mrs. Robson.

#### Dr. Moore's Visit in Seattle.

Dr. Frederick E. Moore and Dr. Hezzie Carter Purdom Moore were the guests of relatives in Seattle, Wash., during the holidays. While there Dr. Moore was invited to meet the local physicians, in the offices of the Drs. Ford, and he gave a most interesting and profitable talk on "The Osteopath's Opportunity for Study in Europe," which was highly appreciated by those present.

#### Osteopathy Helps Another Baseball Player.

Marty O'Toole, the well-known baseball pitcher, now playing with the Pittsburg team, recently visited Brockton, Massachusetts, to get some advice and treatment from Dr. Henry Daniels. O'Toole at one time played with the Brockton team, and Dr. Daniels gave him treatment for a dislocated shoulder. O'Toole expects to take a number of treatments from Dr. Daniels before going south for the early training season.

#### Graduating Class at Des Moines.

A class of twelve will be graduated from the Des Moines Still College of Osteopathy, January 25th, with appropriate exercises. Those graduating are:

Josephine L. Armstrong,	G. Garnet Elliott,
M. Eugene Bachman,	Elmer G. Hornbeck,
Leonard G. Bittings,	Nolen W. Hughes,
John Collier Calhoun,	Theodore T. Jones,
Loren Green,	L. Upton Miller,
Earl Colby Dymond,	La Vergne North.

#### Southwest Michigan Meeting.

The Southwest Michigan Osteopathic Association held its last meeting December 16th in Kalamazoo. Dr. Marion E. Clark being the attraction, a large number were present. Dr. Clark's subject was "Observations in Practice," and his old friends and pupils agreed that he had lost none of his old time magnetism as a speaker, or interest in osteopathy. Those who here made his acquaintance were impressed with his earnest convictions and his manner of presenting them.—Frances Platt, D. O., Secretary.

#### Good Work—Keep It Up.

For more than a year we have refused to buy books from houses that do not patronize our osteopathic periodicals, also insurance companies who do not employ osteopathic examiners. The writer brought this up at the last meeting of the Washington Osteopathic Association, held April, 1911, and asked the secretary of the legislative committee to embody both suggestions in his regular letter to the profession of the state, which was done. Not over an hour ago a book man was told in our office,

"Nothing doing" for his house.—*Drs. W. P. and Bertha L. Thomas, Tacoma, Wash.*

**Boston December Meeting.**

At the December meeting of the Boston Osteopathic Society Dr. W. Arthur Smith, professor of comparative anatomy in the Massachusetts College of Osteopathy, gave an excellent talk on that subject, with illustrations; Dr. John W. Dawson talked on "Lumbar and Sacral Lesions and Easy Methods of Correcting Them." Dr. George E. Perkins of the faculty of the Massachusetts College of Osteopathy was the chief speaker of the evening, and he dwelt on the "Osteopathic Treatment of Venereal Diseases." Dr. Perkins gave a lucid talk, and many of the arguments set forth were good and sound.

**Third District Illinois Meeting.**

The third district I. O. A. met January 10th at Dr. Browne's office, Galesburg. Program: Paper by Dr. Lucy V. Henderson, "Innominate Lesion—Technique for Same"; Dr. Halladay, "Pneumonia"; Dr. Browne, "Technique of Dorsal Region." Discussion and demonstration on each subject. Good attendance. Telegram of sympathy sent retiring president, Dr. Barker, who is suffering from an attack of appendicitis. Officer elected: President, Dr. E. J. Mosier; vice-president, Dr. F. G. Thiele; secretary and treasurer, Dr. M. P. Browning. It was voted to hold a banquet following our next meeting, which will be held in two months at Galesburg.—*M. P. Browning, D. O., Secretary.*

**Approves Exposing Drug Fallacy.**

Excuse my delay in reporting on the drug question. My ballot became mislaid and just turned up. Yes, let us spread the truth about drugs. We well know that "drugs do not cure disease," but often change its form and increase the real evil many fold. This being a fact, then it is the truth, and the truth, in this instance, certainly should be spoken at opportune times and places. Knowing this to be so, it is the duty we owe to ourselves and our fellow mortals. Your "drug" articles in the September *Osteopathic Health* and August "O. P." are certainly fine and to the point. Am glad to note that the sentiment to educate regarding drugs is as large as it is.—*Dr. E. A. West, D. O., Pardeeville, Wis., Jan. 4th.*

**Osteopathic Meeting at Pittsburg.**

The Pittsburg College of Osteopathic Physicians held a banquet December 16th. Many out-of-town osteopaths were present, and a number of interesting papers were enjoyed. Some of the topics were: "What Stand Should the Osteopathic School Take in Regard to Vaccination?" Dr. Vernon S. Peck; "What Stand Should the Osteopath Take in Regard to Educating the People as to the Examination of the Public School Children?" by Dr. A. H. Acornley; "The Proper Scope of Diagnosis," by Dr. L. C. Kline; "What Do You Consider Disease to Be?" by Dr. W. C. Armstrong; "What Is Scientific Treatment?" by Dr. C. A. Detmering; "Osteopathic Philosophy," by Dr. George W. Tebetts. A demonstration of osteopathic technique was given by Dr. C. B. Morrow.

**Two Georges' Review Week a Success.**

The Third Annual Review Week given at Kirksville, Dr. George Still and Dr. George Langhlin, as a post graduate course for osteopathic physicians of the country, was an even greater success than the previous meeting. The high estimation placed on the ability and instruction of the two Georges is shown by the fact that some of those attending came from Canada, several from Texas, many from New York City and Pennsylvania, and, of course, a good crowd from the nearer states. It has been announced that the Review Week which closed December 23d will probably be the last one, but the work has proved so valuable and interesting to those attending that the hope has been freely expressed that the "Two Georges' Mid-Winter Review Week" will not be discontinued for many years to come.

**Iowa Third District Meeting.**

The Third District Osteopathic Association of Iowa met in Burlington, December 16th. The program in part included: "Obstetrics," Dr. Lola D. Taylor; "Rheumatism," Dr. W. O. Pool of Fairfield; "Typhoid Fever," Dr. J. W. Snively of Ottumwa; "Appendicitis," Dr. Laurena Rezner of Monmouth, Ill.; "Suggestion," by Dr. Ridell of Chicago; "Need of Osteopathy in Iowa," by Dr. Della Caldwell of Des Moines, read by Dr. Hibbard. The papers were especially good and followed by an enthusiastic discussion. Many other subjects were discussed in an informal way. A number of good clinics were presented. It was a very helpful and interesting meeting. The association was entertained with a dinner at the Hotel Burlington. Officers elected were: President, Dr. J. S. Baughman, Burlington; vice-president, Dr. E. E. Westfall, Mt. Pleasant; secretary and treasurer, Dr. F. C. Card, Ft. Madison.—*Dr. F. C. Card, D. O., Secretary.*

**Minnesota Meeting.**

A combined meeting of the Minnesota State Osteopathic Association and the Southern Minnesota Osteopathic Association was held January 4th at Rairmont. A particularly good program was prepared and presented, and it proved a valuable meeting for all who attended. Program in part was as follows:

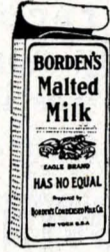
The Diagnostic Importance of the Reflexes in Nervous and Mental Diseases," Dr. J. G. Connolly, Lake City, Minn.; "Technique of Cervical and Upper Dorsal Regions. Clinic," Dr. Chas. W. Johnson, dean of Des Moines Still College of Osteopathy, Des Moines, Iowa;

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**Drs. F. E. & H. C. P. Moore Locate in Portland.**

Dr. Frederick E. and Dr. H. C. P. Moore are again located in Oregon for practice, after an absence of a year and a half, during which time they had a course of special work in the American School of Osteopathy at Kirksville, and traveled abroad visiting various hospitals, and Dr. F. E. Moore also doing much practical work. They have leased rooms in one of Portland's finest new structures, the Selling Building, being located on the ninth floor. The rooms have been rearranged especially for the practice of osteopathy, providing a reception room, a consultation room, a treating room, three dressing rooms, a laboratory, and a private hallway. The offices will be furnished in a distinctive and professional manner, in accord with ideas on office arrangement resulting from numerous visits to osteopaths all over the country. Dr. Moore says he returns to practice more enthusiastically osteopathic than ever before, and we believe it, and we know that he will make a brilliant success for himself and for osteopathy in Portland.

**To the Osteopaths of South Dakota.**

Wishing to thank you all for your help in circulating and signing the petitions sent you, I take this way of doing it. There was not a member of the profession that did not register their name as one who stood against the passage of the "Owen Bill." I have written the congressmen personally and received very prompt answers. While they would make no promises, they agreed to consider our side of the question when it came up. The petitions have been forwarded to the members of congress, and there is no reason for them not knowing the wishes of the osteopaths of South Dakota on this question.

We have the good work started; let us keep it up, and if you have not written to the men from your district, do so at once. A flood of letters coming from the osteopathic profession is bound to have an effect upon the one receiving them, or my knowledge of psychology is at fault. Again thanking you all for your help, I remain.—*John W. Pay, D. O., President South Dakota Osteopathic Association, Milbank, January 6.*

**Oklahoma Annual Meeting.**

The Oklahoma State Osteopathic Association held its annual meeting at Oklahoma, December 9th. Dr. George A. Still of Kirksville was guest of honor, and conducted a number of clinics, as well as giving three addresses, namely, "Recent Development in Theory and Practice in Osteopathy," "Osteopathic Gynecology" and "Osteopathic Treatment of Contagious Diseases." Other numbers on the program were: "Acute Practice from an Osteopathic View," by Dr. F. C. Davis, Crescent; "Unadulterated Osteopathy," by Dr. H. E. Thompson of McAlistler, and "Treatment of the Pregnant Woman Preparatory for Labor," by Dr. Mary L. Webb, of Oklahoma City. Officers elected were: President, Dr. W. F. Nay, of Phoenix; vice-president, Dr. Johnson, of Ardmore; secretary and treasurer, Dr. Elmore, of Elk City; trustees, Dr. J. A. Ross, of Oklahoma City, and Dr. W. A. Cole, of Oklahoma City.

This meeting was the greatest ever held in the history of the Oklahoma Association. Dr. J. M. Rouse, a former president, and Dr. C. E. Dailey, a former secretary, are entitled to great credit for their untiring work and persistent efforts to make the meeting a success.

**Massachusetts Meeting.**

The Massachusetts Osteopathic Society held a regular meeting at the Hotel Brunswick, Boston, January 6th. The first hour of the afternoon was spent in business, the most important action being a vote instructing the president to bring before the present legislature a bill putting the appointments of physicians in hospitals receiving the state funds, under the Civil Service Board, thus opening the hospitals to osteopaths. The scientific program as given below was enthusiastically received. "Dr. Forbe's Technique, What It Has Done for Osteopathic Diagnosis and Treatment," Dr. George D. Wheeler; "Demonstration of Dr. Forbe's Technique," Dr. C. R. Clemens; "Tumors," Dr. Ernest R. Tucker, New York; "The Kidney," Dr. Wilfred E. Harris. At 7:30 the society assembled at the Brunswick for a dinner together and were entertained at its close by Dr. Harry W. Conant, toastmaster; Dr. Dale E. Brown, "A Decade of Osteopathy"; Dr. Helen G. Sheehan, "A Woman's Opportunity"; Dr. Robt. I. Walker, "Our State Society"; Dr. Waldo Horton, "Osteopathy"; Dr. Francis A. Cave, "Osteopathy Retrospective and Prospective"; Dr. Ernest E. Tucker, "The Old Doctor."—*Effie L. Rogers, D. O., Secretary.*

**City of New York Meeting.**

The December meeting of the Osteopathic Society of the City of New York was held at the Astor House, and the attendance, about 60, despite the inclement weather, was encouraging evidence of the wisdom in selecting a place of meeting more accessible for members from Brooklyn and New Jersey. The Society had as guests a

number of our out-of-town associates, and also several friends of members. The program was very interesting. Dr. A. P. Firth, of Newark, contributed a paper on "Food as a Lesion and as a Cure," based on a special study of dietetics and his clinical experience in several hundred cases. The paper brought out many helpful suggestions in the regulation of diet in disease and health, and laid particular stress on knowledge of food values and food combinations. Dr. Martin L. Richardson, of Norfolk, Va., presented a scholarly paper, entitled "A Speculation on the Nature of Nervous Energy." The paper dealt largely with the biological aspect of nerve activity and made certain deductions therefrom. The time allotted for the general consideration of these papers was occupied by a lively discussion. Of special interest during the business session was a report of the Committee on Ways and Means to secure the A. O. A. Convention for 1913 for New York City.—*Richard Wanless, D. O., Secretary.*

**Legislation in the District of Columbia.**

By the number of letters from all parts of the United States that have come to our notice, there seems to be a universal misunderstanding as to the outline of the pending legislation for the District of Columbia. Briefly, the medical status at present is as follows: A board of medical supervisors consisting of five persons. The members are the presidents of the allopathic, homeopathic and eclectic examining boards and two persons, not physicians, one of whom must be a lawyer. The osteopathic bill is to create a new board of medical supervisors consisting of seven persons. The members will be the presidents of the allopathic, homeopathic, osteopathic and eclectic examining boards and three persons, not physicians, one of whom must be a lawyer. The duties of these examining boards are to submit to the Board of Medical Supervisors questions in each and every branch except practice. From these several lists the Board of Medical Supervisors select the questions and conduct the examinations in all branches except practice. In practice the examination is conducted by the sub-board representing the school which is in harmony with the qualifications of the applicant. In a nutshell—the proposed law would be a composite board of seven persons, four physicians, representing the four schools, and three laymen.—*The Legislative Committee, C. D. Swope, D. O., Chairman.*

**Detroit D. O.'s Protest Against Panama Order.**

At a regular meeting of the Detroit Osteopathic Association, the following resolution protesting against President Taft's Panama order was passed and a copy forwarded to the President:

"Whereas, The order effectually excludes osteopathic and other non-regular physicians from exercising their professional rights as guaranteed to them in the separate states of the United States; and,

"Whereas, President Taft, together with those directly responsible for the once defeated effort to create a similarly endowed board at Washington, D. C., have repeatedly given assurance that nothing of the nature of a monopoly of the public health service by any particular school of medicine or surgery would be tolerated by the government.

"Resolved, That this Detroit Osteopathic Society, in special session assembled, does hereby protest against the order above referred to as an injustice to osteopathic and other non-regular physicians, and a violation of the spirit of the constitution of the United States regarding individual rights."

The public interest taken in this matter, as well as other regulations that the Medical Association has tried to have put into effect, is shown by the fact that the Detroit *Free Press* gave this action of the Detroit Association a prominent heading in its issue of December 13th, and devoted about one-third of a column to a report and interview. We congratulate the Detroit Association on keeping wide awake, active and aggressive. It is the spirit and attitude that should be adopted by our associations throughout the country.

**Dr. Hulett Nails Misleading Report.**

The following clipping from the Ohio State Journal explains itself. Dr. M. F. Hulett is always wide awake to secure, as far as possible, a square deal for osteopathy in the newspapers:

Editor *Ohio State Journal*: In your report of the Ohio Osteopathic Society proceedings, Dec. 15th, there is a misleading statement. In your report of one address we find the following:

"Dr. Cloud declared that, although he was a physician, he was also a disciple of osteopathy, and had been enabled to effect cures that would have proved almost impossible without its aid."

The facts are that Dr. Cloud was an osteopathic physician before he took a medical course, and in his address he strongly emphasized that he found osteopathic methods more efficacious than those of the old school, giving this as the reason for practicing the former methods in preference to the latter.

But this is not the main objection to the statement. By inference it makes a distinction between "osteopathist" and "physician." The course of study in an osteopathic college is as comprehensive as is that of the so-called regular school—the difference, in brief, is largely one of therapeutics, together with a method of diagnosis originating with and confined almost, if not quite, exclusively to the osteopathic school. In Ohio, and, in fact, in most of the states, the osteopathist is required to meet by state examination a qualification equivalent to that of other physicians. And, since the osteopathist's field is as broad in its application—surgery being the only exception, and it is only a question of time until that will be

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included—he is a "physician" in all that the term implies.—*M. F. Hulett, Columbus.*

**Overcoming Spinal Curvature.**

Various devices in the form of braces have been introduced to assist in overcoming spinal curvature and other spinal malformations. Many of these have been cumbersome and heavy, so much so as to defeat the object for which they were being used, and many a person has been allowed to go through life with a deformity that might have been overcome if the right appliances had been used. In this connection we wish to call attention to the "Sheldon Spinal Appliance." This appliance is never painful, for the pressure is so evenly distributed that all irritations and soreness is prevented. The muscles are allowed free action, thus preventing atrophy by disuse. It yields only so much and at such places as is necessary to ease and comfort, and yet sustains and strengthens the weak parts so gradually as to restore them to normal formation and development. The average weight of the Sheldon Appliance is only 16 ounces. It is durable, capable of easy, accurate adjustment, and is not noticeable under the clothing. Every Sheldon Appliance is made to conform exactly to individual measurements. Such devices as heavy plaster casts and other crude and painful appliances can now be done away with. The use of the Sheldon Appliance is much less expensive and is a far more humane and effective treatment, for it conforms to all natural curvatures of the body, giving an even and continuous support to all the weak points of the deformed spine. It is endorsed by some of the highest authorities and has been thoroughly tested and proved to meet fully the needs of a great variety of conditions, having been successfully used in over 16,000 cases. The Philo Burt Company, Jamestown, N. Y., will gladly send a book of information about spinal troubles and best method of cure.

**Ohio State Meeting.**

The Ohio Osteopathic Society held its fourteenth annual meeting at Columbus, Wednesday and Thursday, December 13th and 14th. There was a good attendance and a fine program was submitted. The program in part was as follows: "Dilation of Stomach—Diagnosis, X-Ray, etc.," Dr. Hugh W. Conklin, Battle Creek, Michigan; "Demonstration Technique of Dorsal Region," Dr. W. A. Gravett, Dayton; "Osteopathy and the Gastro-intestinal Tract," Dr. D. C. Westfall, Coschocton; "Spinal Curvature and Twisted Pelvis," Dr. Carolyn Sheldon, Beverly; "Treatment and Diet in Dilation of Stomach," Dr. Hugh W. Conklin, Battle Creek, Michigan; "X-Ray Diagnosis of Gross Bony Lesions," Dr. M. F. Hulett, Columbus; "X-Ray Work," Dr. Chas. F. Bowen, Columbus; "Exophthalmic Goitre," Dr. A. Z. Prescott, Lorain; "The Thyroid; Some Phases of Its Relation to Health and Disease," Dr. Helen Giddings, Cleveland; "Lesions; in All Their Phases," Dr. H. H. Fryette, Chicago, Illinois; "Traumatism," Dr. Clara A. Davis, Bowling Green; "Adjustment of Lesions—Demonstrations," Dr. H. H. Fryette, Chicago, Illinois; "(a) Imperative Surgery; (b) Why I Practice Osteopathy," Dr. A. W. Cloud, Canton; "The Successful Conduct of a Practice," Dr. G. W. Bumpus, East Liverpool. An informal dinner was enjoyed at the Chittendon Hotel. Officers elected were: President, Dr. L. C. Sorenson of Toledo; vice-president, Dr. O. Z. Prescott of Lorain; secretary, Dr. E. H. Cosner of Dayton; treasurer, Dr. G. W. Bumpus of East Liverpool; executive committee, Dr. J. H. Scott and Dr. B. H. Becker of Columbus. Dr. E. B. Koontz of London, Dr. W. R. Sanborn of Akron, and Dr. L. A. Bumstead of Delaware; state osteopathic examining committee, Dr. D. C. Westfall of Findlay, Dr. E. M. Hulett of Columbus, and Dr. E. R. Booth of Cincinnati.

**City of New York November Meeting.**

A regular monthly meeting of the Osteopathic Society of the City of New York was held in Geneological Hall, November 21st, about fifty being present.

The address of the evening was delivered by Mr. Edwin A. Jones, the attorney for the Society in the Board of Health case, his subject being "The Osteopathic Physician; His Duties and Responsibilities." In a forceful and convincing address, Mr. Jones took up the various and many duties we have to meet as physicians, pointing out the broad principles of ethics as applied to us as practitioners, and citing the advantages of working together to uphold the highest principles of professional conduct toward our patients and toward each other. In considering the legal phases of osteopathic practice, the speaker took up, in order, Expert Testimony, Privileged Communication, and Malpractice, which important and timely topics proved to be of much interest to all present. This Society is continuing its work of upholding osteopathic principles and practice through organization effort here in Greater New York. The programs of the meetings already held have proven of much interest, and the "osteopathic concept" is always the basis of all addresses and papers delivered before the Society, while technique is made a part of as many programs as possible. With a view to making this Society as much as possible a co-operating organization with the New York State Society and the A. O. A., a committee has been appointed for increasing membership in the State and National societies. Plans are going forward toward establishing an osteopathic clinic, and the work of the committee is meeting with encouraging results. The Board of Health case will probably reach a final decision in the Court of Appeals in January, and we hope for a favorable outcome in the matter of granting transit permits. The next meeting and probably subsequent ones will be held at the Astor House, which is somewhat nearer the geographical center of our membership than our former place of meeting, particularly for the Brooklyn and New Jersey members.—*Richard Wanless, D. O., Secretary.*

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### That February Issue of "O.H." Will Set People Thinking

FEBRUARY issue of *Osteopathic Health* is an exceptionally strong and original number. Its main article is one of Dr. Bunting's editorials in characteristic vein, entitled, "Is the Physician a Death Watch or a Life Saver?" Please see the extended discussion of this article and Dr. A. T. Still's approval of it on page 3 of this issue.

Other features of the issue are short articles on "Floating Kidney," "Gall Stones," "Neurasthenia," and "Osteopathy in Children's Diseases."

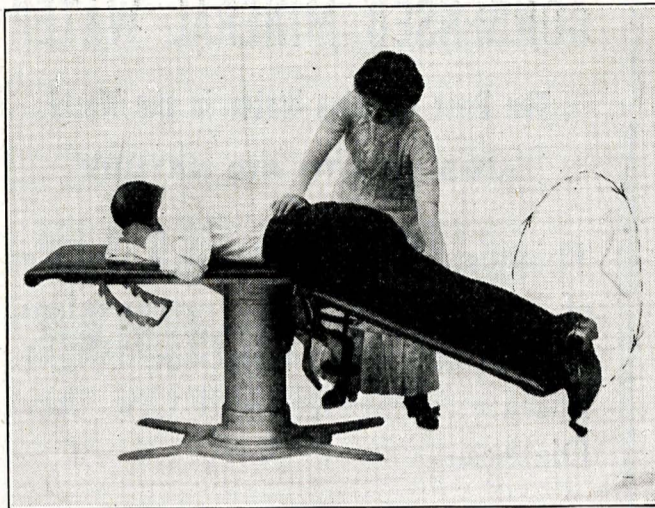
A very fine campaign number for patients, ex-patients and complete strangers to osteopathy. Please order today to be sure and secure your quota.

### Illustrated January Osteopathic Health Wins Much Approval

WE reproduce herewith illustrations used in the January number of *Osteopathic Health*. They were drawn especially for us by Dr. Frederick P. Millard, of Toronto, Canada. They show Dr. Millard's usual good detail work and his excellent ability as an anatomical draughtsman. We expect to be able to publish some more drawings of Dr. Millard's in later issues of *Osteopathic Health*.

Orders for 100 or 200 copies of the January issue can still be filled promptly. The illustrations reproduced herewith illustrate an article entitled "How the Machinery of Life Is Controlled by Osteopathic Fingers," undoubt-

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Illustrating the use of the UNIVERSAL JOINT. The section swings in a complete circle and requires very little effort on part of operator. Weight being supported by a central spring.

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edly one of the clearest articles explaining osteopathy to the laity that Dr. Bunting has ever offered the profession.

Very timely also is an article entitled "A Word to Former Patients." This occupies the leading position in the number and it is very appropriate as a message to send to patients and friends at the opening of the year.

Following are a few of the kind comments concerning the January issue:

\* \* \*  
I received my desk clock and it is certainly a good one, and a very neat pattern. Also received sample copy of the January number of *Osteopathic Health*. It seems to be an exceptionally good one, and I am enclosing an order for 100 copies. —Dr. C. W. Sherfey, Watertown, S. Dak., January 4th.  
\* \* \*

\* \* \*  
Kindly send me 200 copies of the January edition of *Osteopathic Health* with my card as heretofore. This number seems to fill a long felt need in my practice, and looks like a patient getter. —Dr. Daniel Neil Morrison, New York City, January 8th.  
\* \* \*

\* \* \*  
Please send me 100 copies of the January number of *Osteopathic Health*. I am more than pleased with your

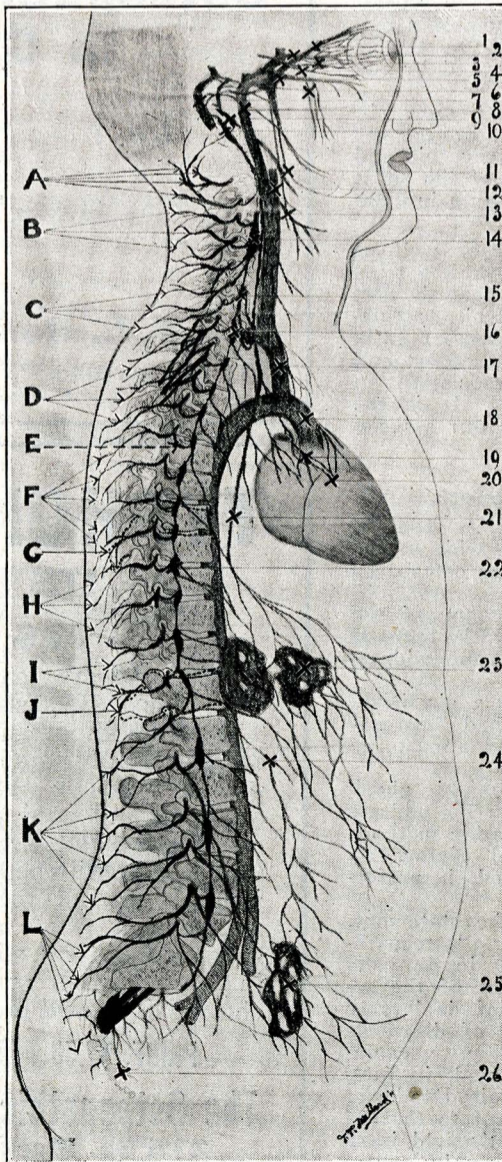


Figure 1.

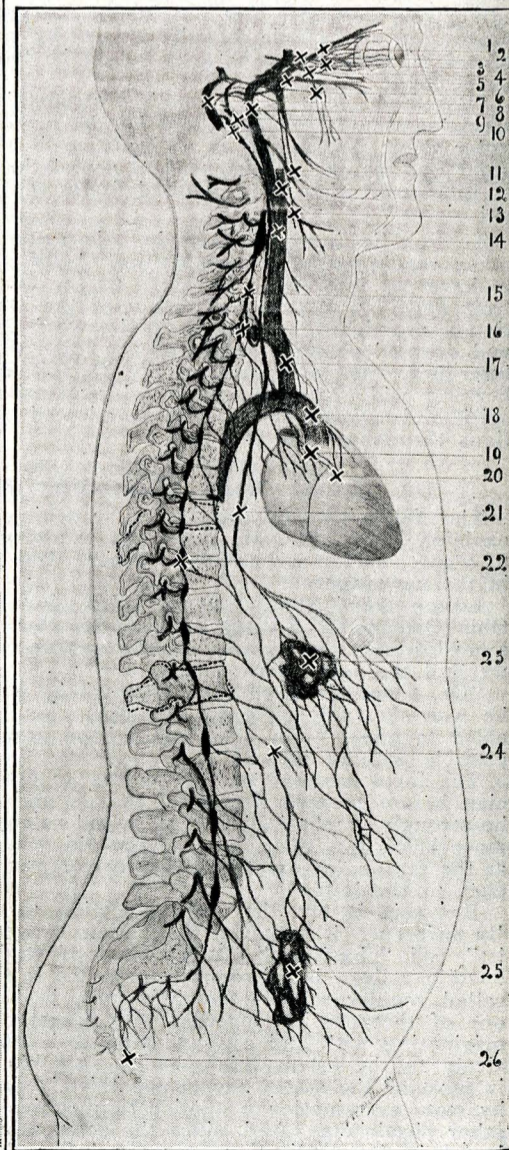


Figure 2.

publication and find it a good investment. My patients and prospective patients are anxious to learn about osteopathy. Wishing you success and a very happy New Year.—*Dr. Charles T. Kyle, Menomonie, Wis., January 1st.*

\* \* \*

Enclosed please find contract for 50 copies of *Osteopathic Health* a month for another year. Permit me to say that I think *Osteopathic Health* is improving in quality. Your "Word to Former Patients" in the January issue is most timely.—*Dr. Aubrey W. Hart, Boston, Mass., January 2d.*

\* \* \*

I consider the January issue of *Osteopathic Health* a most dignified, clear, and comprehensive number. *Dr. L. R. Bensen, New Rochelle, New York, January 8th.*

\* \* \*

*Osteopathic Health* for January just hits the spot, and fills a long felt need. So often a patient who is yielding to treatments slowly but surely needs a little more encouragement. The January number of *Osteopathic Health* furnishes just that encouragement. You have started 1912 with a "humdinger." *Dr. James G. Morrison, Terre Haute, Ind., January 12th.*

Don't forget that the supply of the January issue is now limited, and send in your order at once if you want to make sure that you will be one of those getting a part of the remaining supply.

THE OSTEOPATHIC PUBLISHING COMPANY,  
215 South Market Street, Chicago.

## How They Like the "Door Plate"

Many thanks for the handsome door plate. It is certainly a beauty, and it is admired by all who see it.—*Dr. J. A. Nowlin, Farmer City, Ill.*

I received my door plate, and think it a peach. Thank you for such a substantial remembrance. *Dr. A. M. McNicol, Dallas, Ore., December 31st.*

I received my door plate, and I want to express my sincere appreciation. I think it is one of the nicest things you have produced for us. I have it hung in the front window of my residence.—*Dr. U. G. Littell, Santa Ana, California, January 10th.*

Brass sign received yesterday. It is very nice indeed. Also I have already received results from sending out *Osteopathic Health*, more than sufficient to reimburse me for their cost.—*Dr. E. C. Smith, Carrollton, Mo., December 26th.*

I think it would be a sin and a shame to withhold encouragement from you and the charming Christmas spirit shown by your special door-plate offer. I hasten to place my order for an additional 100 copies of the December issue of *Osteopathic Health*. May your shadow, your Christmas spirit, and your circulation (this last to include your publications) never grow less.—*Dr. Charles F. Banker, Kingston, N. Y., November 18th.*

The brass door plate was duly received and graces my office door. I am well pleased with its appearance and more than ever appreciate your giving the profession the opportunity of possessing such a genteel appearing sign.—*Dr. Ionia C. Twitchell, Morristown, Tenn., January 2d.*

The brass door plate and the clock duly received. To say that I am pleased with them does not express it. They are both beautiful and something every osteopath may well be proud of. Thanking you, and wishing you a very happy and prosperous New Year.—*Dr. Rose Bathirck, Austin, Texas, January 3d.*

I want to thank you for the very pretty door plate. It is a piece of art, and I highly appreciate the gift.—*Dr. Flora B. Brown, E. Mauch Chunk, Pa., January 2d.*

Received the door plate and it is "A" No. 1. Happy New Year to you.—*Dr. J. Talbot, Sebastopol, Cal., January 2d.*

Please accept my hearty thanks for the door plate that you so kindly sent. It certainly is a nice one and I appreciate it very much, but more especially do I appreciate—like the fellow who received the brandied peaches—the spirit in which it was sent. I was especially pleased with the appearance of the Christmas number of *Osteopathic Health*. It certainly looked nice and it was a real pleasure to send it to my friends. Wishing you a happy and prosperous New Year.—*Dr. T. M. King, Springfield, Mo., December 28th.*

The beautiful sign reached me on Christmas day and it was a very appropriate and useful Christmas present to me. It now adorns the front of my office, and I am very proud of it. Wishing you a happy and successful New Year.—*Dr. Oliver H. Cramer, York, Pa., December 28th.*

The brass door plate came safely on Christmas morning. It is certainly beautiful. Thank you. The Christmas number came on time also, and we consider it unusually attractive.—*Drs. Wheeler & Wheeler, Wahpeton, N. D., December 27th.*

The December number of *Osteopathic Health* was very fine. Very attractive indeed. Just the kind of thing

to put out. I also received my Christmas gift door plate, which is the most artistic sign I have ever had. It is a sign that will do credit to any door or window. I thank you very much for it.—*Dr. A. K. S. Calvert, Ponca City, Okla.*

## Personal

*Dr. Elizabeth M. Ingraham of St. Louis, Mo., is spending the winter at St. Augustine, Fla.*

*Dr. J. Stewart Moore, formerly of Falmouth, has gone to London to open an office. Dr. Thomas A. Wiswall of Boston succeeds him in Falmouth.*

*Dr. Sidney A. Ellis of Boston and Dr. Chas. E. Fleck of New Jersey passed the holidays in North Carolina hunting. Both are clever marksmen and they brought back several trophies from their southern trip.*

*Dr. Ira Spencer Frame, of 1619 Race street, Philadelphia, has opened a down-town office at 701-702 Empire building, where he will practice three afternoons in the week for the convenience of patients engaged in business or who desire to take treatments while in the down-town district for any purpose.*

*Dr. J. A. McCaslin, A. S. O., June, 1911, has removed from Butler to Ridgway, Pa., where he has purchased the practice of Dr. F. L. Antes.*

*Dr. Martyn L. Richardson, who is associated with Dr. Alice N. Willard of Norfolk, Va., visited New York City about the middle of December and read a paper before the Osteopathic Society of the City of New York at their meeting held the 16th of December.*

*Dr. Earl S. Willard, of Philadelphia, was recently called to Montreal, Canada, to consult with a physician there upon a case that was in a critical condition.*

*Dr. Frank R. Heine, of Pittsburg has sold his practice to Dr. Frank L. Goehring, and Dr. Goehring has removed his offices from the Diamond Bank building to Dr. Heine's former offices in the Dixon building. Dr. Heine has not yet formulated his plans for the future but expects to be in a little while with Dr. Turfler studying technique. Later he expects to visit Asheville, N. C.*

*Dr. Walter S. Beitel, formerly of Philadelphia, is now located at Los Angeles, Cal., where he has purchased a very pretty bungalow. His residence address is 3002 Fifth avenue. He expects to take the State Board examination next April.*

*Dr. Jenette Hubbard Bolles, of Denver, Colo., is spending a month's vacation in Los Angeles, Cal., taking a very much needed rest after a strenuous summer's work.*

In the December issue of THE OSTEOPATHIC PHYSICIAN it was stated that Dr. W. T. Thomas, of Tacoma, Wash., had removed from the 8th floor of the Fidelity building, but this was an error as Dr. W. T. Thomas still has his offices at the old address. His son, Dr. M. E. Thomas, has removed from North Yakima to 222-223 Bankers Trust building, Tacoma.

*Dr. Claude H. Snyder of Seattle, Wash., has removed his offices from the Denney building to 303-304 Northern Bank building.*

*Dr. M. J. Sickels has purchased the practice and good will of Dr. Frederick W. Woodhull, 439 Mint Arcade building. He is already familiar with Philadelphia, and to some extent with Dr. Woodhull's patients, and it is expected he will meet with success in carrying on the practice.*

*Dr. Frederick W. Woodhull, formerly of 439 Mint Arcade building, Philadelphia, has sold his office furniture and practice there to Dr. M. J. Sickels and has removed to California. He will be located at Alhambra, his residence address being 101 South Fifth street. Dr. Woodhull was so favorably impressed with California when he attended the A. O. A. convention at San Francisco in 1910 that he decided to make it his future home.*

*Dr. Geo. Burt F. Clarke, of Detroit, Mich., has been appointed chairman of the Information Committee of the Detroit A. O. A. Arrangement Committee. He would be glad to hear from any who have suggestions to make concerning the work of this committee.*

*Dr. H. A. and Nellie Mossman, formerly of Chadron, Neb., have moved to Lewiston, Idaho. They have offices at 205-206 New Idaho Trust building. Dr. H. A. Mossman has been out there some three months, and is enjoying a very nice practice. Dr. Nellie Mossman has been in Chadron until recently, and she is now visiting friends in other parts of Nebraska, and she will subsequently join Dr. H. A. Mossman at Lewiston.*

*Dr. B. H. Byers, formerly of Mason City, Iowa., has removed to Manchester, Iowa, and has formed a partnership with Dr. Norman D. Wilson.*

*Dr. and Mrs. C. C. Reid, of Denver, Colo., received an advance Christmas present December 14th, being a fine pair of twins, a boy and a girl, Homer Argall Reid and Ellen Jane Reid.*

*Dr. C. W. Sherfey, of Watertown, S. D., has removed from the New Whistler building to 107½ Oak street, North, which is one block removed from his old address on the same street, but it gives him more room and a better location. He is enjoying a very good practice.*

*Dr. Katherine Broderick, formerly of Torrington, has opened an office at 421 State street, Bridgeport, Conn.,*

*Dr. Broderick lived in Bridgeport a number of years ago and she is well acquainted there.*

*Dr. George E. Hodge, of Crookston, Minn., has purchased the practice of Dr. O. C. Keller, of Grand Forks, N. D., and will immediately take charge of his new practice.*

*Dr. John S. Hastings, A. S. O. graduate, 1911, has opened an office for practice at Gallatin, Mo.*

*Dr. O. C. Keller, formerly of Grand Forks, N. D., has sold his practice there to Dr. Geo. E. Hodge, of Crookston, Minn. Dr. Keller is taking his wife and family to Columbia, Mo., where they will visit friends and relatives for a while, during which time Dr. Keller will travel in Oregon, Florida and other states with a view to choosing some free land which, under the new ruling of the land department, accrues to the family. Mrs. Keller is a descendant of the Nez Perce Indian tribe of Idaho, and she has just enough Indian blood in her veins to give herself, husband and four children each the right to 160 acres of government land. The land can be chosen from any reservation in Florida, Idaho or Arizona. Mrs. Keller is a graduate of the Carlisle Indian Industrial school of Pennsylvania, has taken a business course at college, and is a charming, cultured woman. The knowledge of the new land ruling in regard to Indian grants came to Dr. Keller and his family like the finding of a gold mine. They were not aware until last summer that they were entitled to any of this Indian land, their share of which will aggregate 960 acres.*

*Dr. J. H. Lucas, of Chicago, was obliged to be away from his office from early in December to the middle of January on account of illness. He is now back at his office and able to attend to practice.*

*Dr. B. C. Roberts, formerly of Lincoln, has taken up practice at Decatur, Ill. His offices are in the Wait building.*

*Dr. R. T. Tandy, formerly of Greensburg, Kan., has removed to Grant City, Mo., where he has purchased the practice of Ernest Ewing.*

*Dr. Paschall Morris, of Philadelphia, has taken the practice of Dr. D. A. Shambaugh, of Pottstown, in connection with his Philadelphia practice. Dr. Morris intends to be in Pottstown Mondays, Wednesdays and Saturdays of each week.*

*Dr. Geo. W. and Eva G. Reid, of Worcester, Massachusetts, have been enjoying a short vacation and spent a few days in Bermuda. January 5th they reported the temperature as 70, and the weather ideal.*

*Dr. J. C. Groenewoud, of 1839 East Forty-seventh street, Chicago, has opened a downtown office at 303 Trude Building, and will practice there Tuesday, Thursday and Saturday mornings of each week.*

At a recent meeting of the Fifth district Illinois Osteopathic Association, Dr. C. O. Cline, of Monticello, was elected president.

*Dr. Hugh Conklin, of Battle Creek, Michigan, has announced that he will reserve Wednesday evening of each week for charitable work. Dr. Conklin states that he is doing this for the benefit of the children of the poor more than of any other class. A number of cases of children suffering from deformities and diseases that osteopathy can cure has been brought to his attention, and it is his intention to treat them free of charge.*

The Farmer City, Illinois *Journal* issued a very creditable holiday number. Dr. J. A. Nowlin utilized a full page to good advantage, displaying a half-tone of the "Old Doctor," a picture of the First School of Osteopathy and the present institution, an illustration of the Los Angeles College, of the Still College, Des Moines, Hospital, and also the college building, and his own office building in Farmer City. In the center of the page is given a brief review of the history of osteopathy, and also a statement of the present educational requirements of the recognized osteopathic colleges, and an enumeration of the subjects taught during the regular course. We congratulate Dr. Nowlin very highly on the use of this page. He brings osteopathy very strongly to the attention of the public and does it without any undue personal reference.

*Dr. A. E. Pecinovsky, of Valley Falls, Kansas, has a leading article of over a column in the Farmers' Vindicator for December 8th. It is vigorous in its style, and among other things challenges the old school doctors to prove that often repeated phrase that osteopathy is "good only for some things." We imagine the article set a good many people to thinking down in the Valley Falls section of the country.*

*Dr. Campbell Black and Dr. Jessie M. Coons, of the Toronto Institute of Osteopathy, Toronto, Canada, have established an osteopathic sanitarium at Magnolia Hall, in a suburb of Hamilton, Bermuda. The island is famous for its ideal climate and its beauty and as a health resort. We understand that Dr. Black and Dr. Coons have one of the most favorable locations in the island.*

*Dr. Nellie O. Lundquist, who graduated from the Still College of Osteopathy in January, 1911, is now practicing in Griswold, Iowa. Owing to a seige of typhoid fever last winter, she was prevented from permanently locating earlier, but improved her time during the summer months by taking the Iowa and Nebraska State Board examinations. She successfully passed both.*

*Dr. N. Maude Kellet, of Skowhegan, Maine, has opened a branch office at Auburn and is getting good results there. November 29th, by special invitation, she delivered a talk before the Grange on "The Science of Osteopathy," which was very well received.*

*Dr. O. H. Murphy, formerly of Abingdon, Ill., has located at Beardstown, his offices being in the Beardstown State Bank building.*



Dr. J. O. Glenn, formerly of Kent, Wash., was a visitor at the offices of THE OSTEOPATHIC PHYSICIAN last week. Dr. Glenn has given up his practice at Kent, at least temporarily, and expects to stay in Chicago for some time taking special study on ear, eye and throat.

Dr. Lester A. McMasters, formerly of Danville, Ill., has removed to Homer, Ill., and assumed the practice of Dr. F. C. Hill.

The National Health Bureau proposition is being discussed in the open columns of the Milwaukee *Free Press*. In the issue of December 10th, Dr. Earnest C. Bond contributed a short letter and quoted the set of resolutions adopted by the New York Osteopathic Society, which the *Free Press* reproduced in full. The resolutions of the New York Osteopathic Society are well stated, and this is a good way of briefly placing the views of the osteopathic association on this subject before the public.

"The O. P. Company" acknowledges with thanks the receipt of many pretty cards and calendars and remembrances for Christmas and the New Year. Among the many greetings and good wishes, we have before us cards from Dr. Charles M. Sigler, Dr. Charles H. Whitcomb and Mrs. Charles H. Whitcomb, Dr. and Mrs. Frank H. Smith, Dr. A. C. Moore, Dr. E. B. Waters and Dr. Grace P. Waters, Dr. Charles H. Ervine, Dr. Alice N. Willard, Dr. W. W. Vanderburgh and Dr. Rose Vanderburgh, Dr. Otto B. Gates, Dr. A. P. Kottler, Dr. Nannie J. Chappell, Dr. C. E. Fleck, Dr. Asa Willard, Dr. R. Kendrick Smith, Dr. Franklin Fiske and Dr. Dain L. Tasker and Mrs. Cora Newell Tasker. To the many others who remembered us in letters and notes we want to express our appreciation and our desire that we all may enjoy much happiness and prosperity during 1912.

## Location and Removal

Dr. F. L. Goehring, to Nixon building, Pittsburg, Pa.  
Dr. E. A. Johnson, from Philadelphia, Pa., to Fullerton, Cal.

Dr. M. C. Hurd, at 1612 E. Superior street, Duluth, Minn.

Dr. I. S. Frame, from 1612 Race street to 701 Empire building, Philadelphia, Pa.

Dr. Campbell Black, from Toronto, Canada, to Hamilton, Bermuda.

Dr. W. A. Ford, at 6319 Vincennes avenue, Chicago, Ill.

Dr. J. A. McCaslin, at 311 Center street, Ridgway, Pa.

Dr. W. W. Dye, at 734 Morgan avenue, Palmyra, N. J.

Dr. A. Howard Young, from 436 Central block to 1650 E. Thirteenth street, Portland, Ore.

Dr. Walter Beitel, from 2333 E. Seventh street to 3002 Fifth avenue, Los Angeles, Cal.

Dr. Cecelia H. Evans, from 209 Louise Anna avenue to Central Savings Bank building, Monroe, La.

Dr. Gale C. Perry, from corner State and Capitol streets, Concord, N. H., to 6-7 Pickering building, Manchester, N. H.

Dr. Elizabeth Ingraham, from 605 Princess Studio building, St. Louis, Mo., to 32 Seville street, St. Augustine, Fla.

Dr. A. O. Brewer, from Goldendale to Glenwood, Wash.

Dr. George B. Graves, from 3033 Germantown avenue to southwest corner Hutchinson street and Lehigh avenue, Philadelphia, Pa.

Dr. S. C. Woodhull, from 1007 Broad street, Newark, N. J., to 108 Stewart avenue, Ithaca, N. Y.

Dr. Leon Patrick, from London, Ontario, Canada, to 65 Valpey building, Detroit, Mich.

Dr. T. E. Childress, from Wellsville to Osage City, Kan.

Dr. L. R. Daniels, from Boyte building to 309-311 Forum building, Ninth and K streets, Sacramento, Cal.

Dr. J. A. Thompson, from 105 Colonial Arcade to 306 New England building, Cleveland, Ohio.

Dr. Ira W. Drew, at 222 Land Title building, Philadelphia, Pa.

Dr. C. W. Sherfey, at 107½ N. Oak, Watertown, S. Dak.

Dr. Oscar C. Robertson, at 38 E. Pike, Cynthiana, Ky.

Dr. Roy W. Marsh, at 823 First National Bank building, Uniontown, Pa.

Dr. J. E. Hoskins, at Orr Flesh building, Piqua, Ohio.

Dr. M. E. Thomas, at 223 Bankers Trust building, Tacoma, Wash.

Dr. Milbourne Monroe, at 215 Main street, East Orange, N. J.

Dr. R. T. Tandy, from Greensburg, Kan., to Grant City, Mo.

Dr. Alma C. Kinney, from 1213 Bales avenue to 809 Waldheim building, Kansas City, Mo.

Dr. Edwin Carl Kemp, from Jacksonville to St. Petersburg, Fla.

Dr. Ethel L. Hearst, from 122 N. Santa Fe avenue to 136 S. Santa Fe avenue, Salina, Kan.

Dr. W. D. Engke, at 713 Holly avenue, St. Paul, Minn.

Dr. Winifred P. DeWolfe, from 716 Cass street to 504 Fine Arts building, Detroit, Mich.

Dr. Fred D. Baker, from Hardenbrook avenue to 1530 N. Broad street, Philadelphia, Pa.

Dr. Albert F. Brown, from Mt. Clemens, Mich., to London, Ontario, Canada.

Dr. Maude Tupper, from corner Twenty-first and Howard streets, Omaha, Neb., to Aiken, S. C.

Dr. Julia Chase, from 218 Islington street to 33 Market street, Portsmouth, N. H.

Dr. Ernest W. Dunn, from Norfolk, Va., to New Berne, N. C.

Dr. Albert U. Jorris, to 514 McMillin building, La Crosse, Wis.

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Dr. B. H. Byers, from Mason City to Manchester, Iowa.

Dr. Elizabeth Broach, to 15 East avenue, Atlanta, Ga.

Dr. L. C. Marshall, from Big Timber to Livingston, Mont.

Drs. H. A. and Nellie Mossman, from Chadron, Neb., to 205-6 New Idaho Trust building, Lewiston, Idaho.

Dr. Nellie O. Lundquist, at Griswold, Iowa.

Dr. M. J. Sickels, at 439 Mint Arcade building, Philadelphia, Pa.

Dr. F. W. Woodhull, at 101 S. Fifth street, Alhambra, Cal.

Dr. Garfield Inwood, at 1337 W. Adams street, Chicago.

Dr. Bertha R. Wilson, at 703 Shukert building, Kansas City, Mo.

Dr. Sarah F. Pugh, at 150 Forsyth building, Fresno, Cal.

## Partnerships Formed

Dr. B. H. Byers and Dr. Norman D. Wilson at Manchester, Iowa.

Dr. B. W. Sweet and Dr. F. E. Avery, at Erie, Pa.

## Married

Dr. Jennie C. Gleason, of Akron, Ohio, and C. W. Williams, of Galesburg, Ill., at Galesburg, December 4th.

Dr. W. H. Thompson and Miss Charlotte Bothwell at Hamilton, Mo.

## Born

Born to Dr. and Mrs. Lewis D. Martin, of Barre, Vt., November 29th, 1911, a nine-pound girl, Victoria Olive.

Born to Dr. and Mrs. G. A. Aupperle, of Sutherland, Iowa, January 9th, a six-pound boy, Donald Keith.

To Dr. and Mrs. C. C. Reid, of Denver, Colo., December 14th, a boy and a girl, Homer Argall Reid and Ellen Jane Reid.

## Want Ads

FOR SALE—Good practice (7 years) in wealthy town in oil field, Pa. Will sell for cost of equipment, or will sell one-half interest to lady D. O. Must get away for a while. Address, Key 281, care The O. P. Co., 215 South Market St., Chicago, Ill.

WILL share well equipped offices with reputable osteopath. Apply to Dr. J. W. Banning, Citizens Trust Bldg., Paterson, N. J.

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FOR SALE—Practice and office furniture in a beautiful and wealthy Missouri town of over 4,000 population. Good railroad facilities. Farmers with good bank accounts. Only osteopath in the country. Practice established seven years—runs from \$2,000.00 to \$3,000.00 a year—is increasing—last two months over \$700.00. Splendid opportunity for a gentleman or lady or both. Terms, \$700.00 cash. Reason for selling, to take a post-graduate course. Possession given March 25th, 1912. Address "Golden Opportunity," care The O. P. Co., 215 South Market street, Chicago.