

The Osteopathic Physician

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The Osteopathic Physician

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FIELD COMMENT *on* LIVE TOPICS

How the Chiro Were Defeated in Colorado

Another Great Osteopathic Victory Due to a Whitehouse Organization

Colorado made a record during a ten day campaign last October, that should be and, no doubt, will be of interest to Osteopathic physicians everywhere.

We have been told by many in the profession that the best way to deal with chiro is give them plenty of rope and let them hang themselves. The fact is, though, that in the very states from which this advice comes, the chiros, like most other bandits, used the rope given them to hang the Osteopaths.

In Colorado, like in all other states, the chiros had been telling the public that they have studied osteopathy as well as chiropractic. The public does not know that in order to do this it would be necessary to have 36 months of osteopathic education, 36 months of high school education and 18 months of chiropractic education, or a total of 90 months. How they could get all this in six months they do not attempt to explain.

In Colorado during the Initiative Campaign, the chiros were telling the public that the osteopaths favored their measure, and they were getting away with it. You may know how red-headed they got when the public was told the truth.

About 18 months ago the chiropractors secured the necessary number of signatures to an Initiative Petition for a Separate Board bill in this state. The statement referred to above helped them get many signatures of osteopathic friends, and would have helped them get many votes, but for the Eleventh Hour Campaign on the part of the Osteopathic Profession.

In order that the reader may thoroly understand the situation, it may be well to give here some information about the status of chiropractic in this state.

Five years ago a law was passed in Colorado creating a medical board, requiring the same examination from medical, osteopathic and other graduates, and granting the same rights and privileges under the same license. No educational requirements were written into this law, either preliminary or professional. It is possible, therefore, for a chiropractor, no matter how little education he has, to take this examination. Realizing, though, that it would be impossible for them to pass an examination, requiring a test in all the fundamental subjects of medicine, the chiros, in the state at that time, insisted that a different arrangement would have to be made for them. A special provision was, therefore, written into the law, providing that if they would show 18 months of education in a college requiring that much actual attendance, that they would

be granted a license without an examination. No preliminary education to be required.

All of the chiropractors who were in the state at the time of the passage of this act were compelled to show only four months of education to receive a license. Most of these now practicing in this state were granted a license under the four months provision, for very few have since been able to show that they had complied with the 18 months requirement.

At the time the chiropractic petition was being circulated, the Osteopaths paid very little attention to it. However, at the Rocky Mountain Conference last summer the matter was brought up by Dr. D. L. Clark and Dr. G. W. Bumpus, who realized the seriousness of the situation, and, therefore, recommended immediate action. However, the convention, after some discussion, voted to take no action against it.

Due to a number of vigorous protests on the part of others, this action was rescinded a few hours later, and it was then voted to appoint a committee to investigate the contents of the proposed measure.

Just five weeks prior to the election in November, Dr. Schoonmaker called a meeting of the trustees and legislative committee in Denver to consider the measure. Everyone present urged that some action be taken but no one seemed to have any well formulated plan. It was suggested by one of those present that every osteopath work individually, doing the best he could. It seemed, though, that without an organized effort that not much would be accomplished, and that the bill would be certain to pass. Also that very few of the profession would work individually and get the best results. However, no one seemed to know just what to do, so the meeting was adjourned without taking any action. Unfortunately neither Dr. Schoonmaker, Dr. Bumpus nor Dr. Clark were able to attend this meeting.

About ten days later Dr. D. L. Clark secured a copy of the Initiative measure and again called it to the attention of Dr. Bumpus. It was evident, upon investigation, that the measure contained many vicious clauses.

Dr. Bumpus immediately phoned Dr. Schoonmaker, president of the association, by long distance, calling his attention to the real purpose of the measure, and the fact that no action was being taken against it. A few days later Dr. Schoonmaker appointed Dr. Bumpus as chairman of a Special Legislative Committee to take immediate action.

Dr. Bumpus selected his committee, called a meeting and work began. This was less than

three weeks prior to the election. No time could be lost and no time was lost.

The Initiative Measure was read from beginning to end by the committee in session and every clause was thoroly scrutinized. The most vicious clause in the measure was the one that provided that all the chiropractors who had come to Colorado to practice or to live, after having taken a short course or a correspondence course and failed to meet the present requirements of 18 months, would be granted a license, upon the passage of this new measure, WITHOUT EXAMINATION OR PROOF OF QUALIFICATIONS. In other words it meant licensing, in one swoop, all those who had previously failed to secure a license under the existing law. If we are going to pass a law every five or six years to license those who have failed in the meantime, we might as well not have any laws.

While the committee found many other brazen clauses in the measure, it picked out only the most blatant ones, and prepared the following leaflets.

Vote no on Amendment No. 2. An act relating to the practice of chiropractic. Yes—No—X. Maintain the educational standards for those who treat the sick. Every Medical School and every Osteopathic School in the United States requires at least 4 years High School, 4 years Professional Education. Total 8 years. The Colorado law requires that all physicians must pass a thorough examination to prove their fitness to treat the sick, before receiving a license. Amendment No. 2 provides that Chiropractors shall be granted the rights and privileges of physicians without either examination or qualifications.

The following is an exact quotation from amendment No. 2:

"Any person who has without such license practiced Chiropractic in the same County or City and County in Colorado, continuously for one year shall be granted a license to practice Chiropractic by said board WITHOUT EXAMINATION OR OTHER PROOF OF QUALIFICATIONS."

It requires 8 years of study, 4 years high school—4 years professional education to become a Veterinary Physician (Horse Doctor) in this state. Amendment No. 2 provides for the licensing of unqualified Chiropractors without EXAMINATION OR PROOF OF QUALIFICATIONS. Do you want a correspondence school chiropractor to have the right to treat your wife and children with less than one-tenth the education that is required of the doctor who treats your cattle? If not, vote "No" on Amendment No. 2.

In addition to the leaflets several letters were prepared by the legislative committee to be mailed to all patients and friends of osteopaths that could not be seen personally. Over 75,000 of these leaflets and over 20,000 letters were printed immediately and distributed to the osteopaths throughout the state for distribution among their patients.

It required a week of committee meetings and preparation to get everything in readiness for the campaign. Meetings were then scheduled in seven cities in the State and four of these meetings were conducted by four of the

members of the legislative committee on the same evening. The meeting in Denver was held the night preceding, at which time the details of the campaign were completely outlined. This left only ten days for the actual campaign. After the meetings had been conducted the profession were kept in touch with the campaign daily by letter.

The entire profession was organized into teams with one captain for every five or six members. The captain was supplied with additional literature and letters, and he in turn kept his team members supplied and assisted them in every way possible.

One of the most remarkable features about the campaign was the fact that after the legislative committee furnished every member of the profession with all of the literature and letters that he could use during the campaign, as well as paying all of the other expenses of the campaign, which necessarily were tremendous due to the high cost of printing and the large expense of postage, stenographic service and so forth, there was in the treasury of the association at the close of the campaign \$445.07 more than when the campaign began. We do not believe that this record has ever been equalled by any other state during the past quarter of a century.

Not only were the funds in the association treasury increased by almost \$500—which is quite a surplus for a state with only 125 osteopaths—but the membership was increased more than 100% and the paid up membership 500%.

In the city of Denver alone, there were eight teams of five and six members each. Six of these teams stood 100% in membership at the close of the campaign, the 7th team stood 80% and the 8th team stood 66% or a total average of 93% paid up membership, and don't forget that the membership dues in Colorado are \$25 a year. Where is there a city in the United States with over forty osteopaths that can boast of a 93% paid up membership on a basis of \$25 a year dues? This is another record that never has been equalled anywhere.

This is, however, not all of the story, for in addition to paying dues, 83% of the Denver osteopaths paid an additional \$25 or an amount equal to their dues, for advertising in the daily papers.

The advertising feature of the campaign was a new venture for osteopathy, but a most successful one. We were told by leading advertising men in this city that our advertisements were among the cleanest and best political ads published during the entire campaign. The advertisements of the chiro, on the contrary, were perhaps the most bitter and vehement.

Advertisements were carried in all four of the Denver daily papers. Two Sunday morning editions and two Monday afternoon editions. The Sunday editions are read in nearly every home in the state of Colorado and, therefore, reached the voters in every section of the state.

The advertisements carried were full page in length and about two-thirds of a page in width. \$625 was raised for advertising by the Denver profession alone, in addition to dues. A similar advertising campaign was carried on throughout the state by the profession in other cities. On the night of the meeting in Greeley every Osteopath present placed a check for \$25 on the table, for advertising.

While we all know that the medical profession taboos advertising, our advertisements were not only complimented, but two members of the medical profession, when they saw the advertisements, sent, unsolicited, checks to help cover the expense. Not only was this done in Denver, but in other cities the medical profession joined the osteopaths in helping to pay for the advertisements in their local papers.

Just how successful the campaign was can

be determined by the votes cast. It was virtually admitted before the campaign was started that the amendment would carry by a large majority. However, when the votes were counted, the votes against the measure were 109,385 as compared to 84,268 in favor of the measure, or a majority against of 25,115.

This majority in itself does not show a very decided victory, but when it is considered that the chiropractic amendment was defeated by over 25,000 votes, while other amendments carried by over 100,000, it can readily be seen by what a tremendous majority it would have carried if no action had been taken against it, and also what a large number of citizens voted for other amendments while voting against this one.

The good work done by patients of osteopaths throughout the state, not only in the cities in which osteopaths were located, but elsewhere can be illustrated by the following letter:

Dr. J. E. Ramsey,
Denver, Colo.,
Dear Doctor:

Your letter enclosing circulars regarding Amendment No. 2 received. I worked against it here for you, and you will be glad to know that all ballots cast (85 in all) voted "NO" on Amendment No. 2.

Respectfully,

Mrs.

Como, Colorado.

The real educational status of chiropractic was so well advertised during this campaign that when the chiro introduced a similar measure in the legislature several months later, it did not even get to second base. The measure never became enough of a menace to warrant the osteopathic profession to take any stand against it. The only letter that was sent out during the legislative campaign contained the following paragraph: "The chiropractics Separate Board Bill is still in committee in both houses."

No doubt the reader is convinced by this time that the osteopaths of Colorado are a bunch of live wires, that do things and do them right, and this certainly was true during this campaign. Co-operation was virtually unanimous. Not a single individual spent his time criticizing while the remainder were working.

But it has not always been so. Colorado osteopaths were formerly very much like the osteopaths of other states. Most of them were so busy treating patients that they had little time or inclination to lock the stable until the prize therapeutic profession—Osteopathy was being stolen. Two years ago it was almost impossible to get a quorum at a Denver City meeting.

It was not until Dr. Whitehouse came through, with his splendid enthusiasm for the Western Association and the Circuit Clinic, that things began to change. Today, Colorado

has an association second to none in the profession.

Fortunately Dr. Whitehouse was in the state at the time the chiropractic menace arose and to his excellent leadership must be given credit for the remarkable victory achieved. Dr. Whitehouse not only suggested the entire plan of campaign, but carried it to a successful completion, and then, as though that was not enough, doubled our membership and for the first time in our history, gave us a substantial sum in the treasury for possible future needs.

The Legislative Committee is convinced, after our experience, that Dr. Whitehouse could do for other states what he has done for Colorado—in other words, increase their dues to \$25, increase their membership from 30 to 50 percent, get more results in three weeks than an unorganized profession would in three years, and leave the state with more money in the treasury than when he started.

The pity is that the profession needs a man of his ability, but cannot afford to pay what his services are worth. He personally realizes this, and has, therefore, gone into a private business, which he hopes will net him enough of a return to enable him to give his time to the profession, when needed, without remuneration.

When the committee asked Dr. Whitehouse to conduct the campaign he stated that he would conduct it for \$1500 but that he preferred not to conduct it at all, for he desired to get out of Association work until he could afford to donate his services. Later he agreed to refund the \$1500 to be paid him, if the committee would agree to meet certain conditions. These conditions were to the effect that every member of the legislative committee would conduct at least one meeting in the state of Colorado at his own expense, and would give not less than one hour to the work of the campaign to every five hours given by himself, that he would refund the \$1500 paid him for conducting the campaign.

While the members of the legislative committee spent at least three-fourths of their day treating patients, Dr. Whitehouse gave from 12 to 16 hours every day, devoting his time exclusively to the campaign. In addition to this he paid his own living expenses amounting to several hundred dollars and refunded every cent paid him for services. Furthermore, he paid his dues to the Colorado Association and contributed his share to the advertising fund, in spite of the fact that he did not even hold a license in this state!

A greater or more unselfish service no man has ever rendered osteopathy. You might do this for your own state, but would you do it for a state in which you did not even hold a license?

LEGISLATIVE
COMMITTEE

G. W. Bumpus, *Chairman*
D. L. Clark
R. R. Daniels
G. W. Perrin
R. B. Powell

Osteopathic Bill in California Legislature Crushed by Medical Steam Roller

[From "Team Work"]

During the session of the California Legislature which has just closed, a bill was introduced (since known as Assembly Bill 1055) which was designed to give the osteopathic profession relief from the intolerable oppression to which it has been subjected under a composite board. The osteopathic representation on this board being outnumbered four to one by the medics, the latter held the balance of power and controlled the policies of the board as completely as if there were no osteopathic representation at all.

Early in the legislative session it became evident that the medics had an elaborate program both of defense and offense. In addition to their opposition to the osteopathic bill, they introduced some bills of their own which were designed to crush osteopathy in California. Shortly after the introduction of our bill they boasted that it would be "killed" on the floor of the Assembly. They worked hard to accomplish this, but the bill passed the Assembly and went to the Senate, and was referred to a committee. This committee held a hearing on it

bill but could not send it back to the Senate because of the opposition of five members, two of whom were M. D.'s. Thereupon the Senate body passed a resolution calling the bill out of committee. Three hours before the final vote was taken in the Senate there was every indication that the bill would pass; but during those three hours the steam roller, groomed for the occasion, came lumbering out from its lair, and when the vote was taken it was 15 ayes and 24 noes.

That the defeat of the bill was not due to a lack of sentiment in our favor is shown by the fact that the vote on the Senate resolution calling the bill from committee was 23 ayes to 12 noes. Those who reversed their votes on

the final roll call did so because the political pressure which was brought to bear upon them was stronger than they.

Our legislative representative did priceless work in killing the bills which the medics introduced to crush osteopathy. Our ablest generals sacrificed many days of time and thousands of dollars of their practice while carrying on this fight.

Although the result of this battle is not what we desired, the war is still on. A good fighter is never beaten until he admits defeat. If the case is to be settled on its merits instead of on a political basis, we shall have to put it before the voters of the state at the next general election.

TO SEE OURSELVES *as* OTHERS SEE US

The Human Side of Osteopathic Meetings

By the Truth Teller*

Why not be honest once? You know we are not always absolutely so, even with ourselves.

A few weeks before the date for the annual meeting of the AOA do not most of us feel a stir within that prompts us to get away from the dull, deadly, nerve racking, daily grind? Oh, I know that we are in love with our work; that we get a lot of satisfaction out of bringing relief to suffering fellow humans—but we are not always in that mood—and we are going to be honest this one time. Aren't we weary; and as the warm days of June begin to oppress us isn't there an irresistible urge to get as far away as possible from the neurasthenic who persists in telling us about the obscure and obstreperous pain that's been nagging at her since the last treatment? Or, mayhap, it's the old grouch whose rheumatism persists in breaking out in new spots. Don't we feel like telling all such, as emphatically as the English language and its sparse fund of expletives will allow, to go plumb to the devil? And, of course, we don't do anything of the kind.

Instead do we not do our best systematically to instill into the mind of each patient the idea that we are going to the annual meeting, reluctantly, as a patriotic duty to our profession, and particularly to get all the latest knowledge on the obscure, interesting and baffling disease with which that individual patient is afflicted? Do we not try to fix it with our wives—or husbands—by attempting to create the belief that the meeting could hardly go on without us; and that our professional lives would be blighted if we did not get to that meeting and learn all the latest that is to be known about the treatment of disease? Of course we do; and, in the process, we almost make ourselves believe it, too.

And when at last we proudly nail up the notice on the office door that we are attending the AOA meeting, have our grips and wardrobe trunks packed, checked and ourselves on the train, do we not shed care and responsibility as a duck's back sheds water; do we not feel like kids let out from school, or healthy colts in a pasture? We do. Metaphorically we kick up our heels. We forget there are any sick folks in the world. If, by prearrangement, we pick up enroute a colleague—an old college friend perchance, don't we have glorious times eating big meals in the diner, and blissfully swapping yarns as we burn good tobacco in the smoker—if we be males? And whether we are males or not, does not romance stir again in the blood when we manage to make a chance

acquaintance with some interesting person of the opposite sex who is traveling on some similarly serious mission, and who is in a like light-hearted mood? Remember, before answering, that we are trying here to be honest.

When we get to the convention hotel, take a bath and for the first time don the suit of clothes that we have skimped along for months to buy for this particular occasion, don't we fancy we look rather chic, distinguished and professional; and don't we enjoy showing off before our colleagues this evidence of our prosperity? I'll say we do! And particularly do we—both men and women—like to make a dazzling display on the night of the reception. And we fellows with the bald or gray heads, don't we like to shake the light fantastic with the good-looking wives and daughters of our fellow practitioners? To be sure we do.

Then on the opening morning we assemble to hear the distinguished minister pray, and listen to the young man whom the mayor—who finds he has urgent public business elsewhere at that identical hour—sends as substitute for him. And, except that we rally in numbers for the election, isn't this the only time we are anywhere near all together? For some of us have to look up a distant kinsman, or a patient we had once treated from that city. Others from the bush league towns must needs go out to the park to see a real game. Then we have to visit the big stores to pick up a few souvenirs for the companions left at home, and something to gladden the hearts of the kiddies of the family.

It was barely possible, too, that before the great draught set in, some congenial and convivial souls among us were wont to foregather in the cool sequestered portion of the inn for a certain kind of refreshment for the inner man—dost remember Parker?—but why reawaken memories that can evoke only vain and arid regret? And, anyway, those who thus disported themselves were so few as to be practically negligible.

To some of us lazy ones it is amusing to watch, commiseratingly, the knowledge-gluttons with their serious, intent faces and omnipresent notebooks. They rush to the front seats when a paper or address is being given and seemingly write it all down. They push up to the side of the table when a demonstration is in progress and insist upon putting their own fingers on the lesion, ask questions, and proceed to try out the new technic, then and there. They were the gradgrinds in college, and haven't got over it yet. They are running true

to form, and no doubt enjoying themselves; so, why should anyone complain?

The more careless, and care-free, among us are content to read the papers, a small dose at a time, when they appear in *The Journal*. The one best bet, some of us think, is to get the crack technicians cornered, one at a time, in a room with a treatment table and one or two cronies, and have them show just how they do their specialties. By mastering a few good points in this way—and you just can't do it when a man is demonstrating before a large room full—you get the worth of the money spent for the trip. As a matter of fact if you try to cram a whole post-graduate course into a few days you go away with weariness of soul and a feeling that your brain pan is very like a hot skillet of scrambled eggs.

There is ever a small contingent suffering with a congestion of language. The practice of osteopathy is not calculated to give full scope to oratorical powers; it doesn't afford a sufficiently large audience. So at our meetings, it matters not what the subject under consideration may be, these bottled up, not to say pumped up, individuals must deflate—or bust. But we all know these fellows and lest this chronicler be likened unto them he will waste no more words on the word-mongers.

Then there's the administration group—always ways. They are the politicians; perhaps they would prefer to be called statesmen. The weight of the universe is upon their shoulders, and, egad, they look it! Before the meeting ends they are worn and haggard. They not only watch, but make the wheels go round. And isn't it amusing when some bungling neophyte butts in and innocently throws a monkey wrench or a crow bar into the machinery? The funniest thing, though, is the fact that the machine is usually able to absorb or digest the foreign body—if it doesn't actually derive nourishment therefrom—and run just as well as before!

The real expansion of soul, however, comes when a group of the old war horses gets together in the lobby or preferably in some one's room, and Charles, or Wash, or Joe, or John, or Mac, or Arthur, or Ban or Bill, or Walt, or Harry, or most anyone else gets his tongue unlimbered and going good. It is well worth a trip across the continent to hear the flashing wit and scintillating repartee that greets his remarks, and to join in the hilarious laughter which at such times becomes highly contagious.

And when the mood induced by this jocularity becomes somewhat mellowed, how we like incidentally to *hint* at vast sums paid out for income taxes, not being too specific, of course, as to the exact amount! Rather do we intimate that there are large deductions on account of dependents, and generous contributions to sundry worthy philanthropies. There is sure to be some quite large, loose talk in the way of advice about investments; some babbling about bonds, stocks, industrials, farms, mines, producing wells, etc., which we own or control.

But in more serious vein, wherever two or three are gathered together, there is usually a talking over of cases, and interchange of experiences and ideas that are sure to be helpful throughout the following year.

Some of us at the close of the meeting, before going back to work, take a little side trip to the town where we were raised and where, in the old days, we delivered groceries, taught school, checked baggage, preached, spread mortar or whacked mules. We go with the expectations of inducing envy in our old associates by our good clothes and general air of prosperity—only to find that many of the old boys have become war profiteers and disdainfully look on us as the merest pikers.

Finally, with a feeling of genuine content, now that we have got the rust out of the hinges of our minds and a new perspective, we go

*An ex-president of the AOA.

back to our offices—back to the neurasthenic and the rheumatic to find that, after all, they are human and are really glad to see us—back again to our intelligent, loyal and appreciative clientele that makes life worth living and osteopathy worth practicing. With renewed enthusiasm—still being strictly honest—we take up the old job which, after all is said and done is, for us, the greatest and most satisfying work in the world, and settle down to another year of honest toil and worthy recompense.

[For Immediate Publication in Your Local Newspaper.]

The National Osteopathic Convention

By R.K.S.

The twenty-fifth annual convention of the National Osteopathic Association will be held in Cleveland, Ohio, the last week in July. About three thousand osteopathic physicians, surgeons, and specialists from the United States and Canada will be present. On the preceding week will occur the annual convention of the osteopathic eye, ear, nose, and throat specialists. This is the convention of the American Osteopathic Society of Ophthalmology and Oto-Laryngology and several hundred specialists will be in attendance. Clinics will be held in all the specialties and for osteopathic and surgical diagnosis during the entire two weeks.

Dr. William E. Waldo of Seattle, Wash., president of the American Osteopathic Association, will preside at the convention.

The operative technique on the program will be in charge of Dr. Evelyn R. Bush and Dr. Carl J. Johnson of Louisville, Ky., Dr. Bush supervising the exercise technique and muscle training, and Dr. Johnson the adjustive technique and osteopathic principles.

"Petering Out at Forty" is the suggestive title of a paper which will be read by Rowland Haynes, director of the Cleveland Recreational Council. George Davis Bivin, M.A., Ph.D., of Chicago will discuss the newest developments of psycho-analysis. Newer knowledge of the relation of oral infections to disturbances in the nervous system will be demonstrated in the form of motion pictures, presenting the latest dental research, by Weston A. Price, M.S., D.D.S., of Cleveland.

The ductless glands and the manner in which their extraordinary influence over the body may be controlled by osteopathic adjustment will be discussed by Dr. Arthur M. Flack, dean of the Philadelphia College of Osteopathy. How some forms of goitre disappear when the bones in the neck are corrected osteopathically will be told by Dr. Allen Z. Prescott of Syracuse, N. Y. The x-ray reveals tuberculosis many times when it is not discoverable by other methods, and this will be demonstrated by Dr. Francis A. Finnerty, a radiologist from Montclair, N. J.

The nephew of the founder of osteopathy, Dr. George A. Still, who is president of the American School of Osteopathy and surgeon-in-chief of the Kirksville, Mo., Hospital, whose practice is limited exclusively to major surgery, will speak on surgical diagnosis.

On Monday evening there will be a reception and ball, and on Wednesday forenoon there will be a boat trip on Lake Erie. The annual banquet will be Thursday evening.

The eye, ear, nose and throat section will be in charge of Dr. Curtis H. Muncie of Brooklyn, N. Y. Dr. J. Deason of Chicago, will demonstrate the osteopathic methods of operating with the finger instead of with instruments in the throat. The treatment of acute inflammation of the ear will be discussed by Dr. L. M. Bush of Jersey City, N. J. Dr. Glenn S. Moore of Chicago will read a paper on vertigo. "The Nose as an Important Factor in Physical and Mental Development" is the title

Is it not true—unless we happen to be on the program or get elected to office and have it all written up in the home paper, that the social features, the change, the relaxation, the mingling with our fellows, the formal and informal exchange of ideas, the rejuvenation that comes from all these, are the best things we get, or can hope to get, out of our annual meetings?

And, honestly now, aren't these things supremely and transcendently worth while?

of a paper in which Dr. John H. Bailey of Philadelphia claims that many cases of retarded development could be prevented by getting the nose into normal condition. Dr. L. S. Larimore of Kansas City, Mo., will speak on the nasal respiratory function. Dr. James D. Edwards of St. Louis claims that glasses may be thrown away after the osteopath changes the shape of the eyeball by the new technique which he will demonstrate. A new local anesthetic will be demonstrated by Dr. T. J. Ruddy of Los Angeles.

The gastroenterology section will be in charge of Dr. Charles J. Muttart, professor of gastro-intestinal diseases at the Philadelphia College of Osteopathy. Dr. Hugh Conklin of Battle Creek, Mich., secretary of the State Board of Examiners in Osteopathy of Michigan, will report the latest researches of colon irrigation. Dr. Charles C. Teall, professor of osteopathy at the American School of Osteopathy, Kirksville, Mo., will demonstrate his special technique for palpation of the cecum. Specific abdominal exercises will be demonstrated by Dr. Andrew A. Gour of Chicago. Dr. C. W. Young of Grand Junction, Colo., will demonstrate the use of colon dilators, and gastro-intestinal reflexes will be demonstrated by Dr. S. V. Robuck of Chicago. The adjustment of prolapsed abdominal organs will be demonstrated by Dr. Dayton B. Holcomb of Pasadena, California.

The gynecological section will be in charge of Dr. Dena Hansen of Moose Jaw, Saskatchewan, and will include papers by Dr. Anna E. Northup of Moose Jaw, Dr. Nettie H. Hurd of Chicago, Dr. Robert D. Emery of Los Angeles, Dr. Harry C. Collins of Chicago, Dr. Ella D. Still of Kirksville, Mo., Dr. Percy H. Woodall of Birmingham, Ala., Dr. Frances Graves of Boston, Dr. Grace Simmons of Milan, Mo., and Dr. Cecelia G. Curran of Philadelphia.

The surgical section will be presided over by Dr. George J. Conley of Kansas City, Mo. Papers will be read by Dr. O. O. Bashline of Grove City, Pa., Dr. W. Curtis Brigham of Los Angeles, Dr. Simon Peter Ross of Philadelphia, Dr. F. J. Trenery of Des Moines, and Dr. Frank L. Bigsby of Kirksville, Mo.

The pediatrics section will be in charge of Dr. Harry W. Sutton of Galt, Ontario. Infectious diseases will be discussed by Dr. Effie O. Jones of Evanston, Ill., and mental defectives by Dr. Raymond W. Bailey and Dr. Ira W. Drew, both of Philadelphia.

The laboratory diagnosis section will be in charge of Dr. Thomas R. Thorburn of New York City, and the public health section will be presided over by Dr. Jenette H. Bolles of Denver, Colo.

The memorial to the founder of osteopathy will include addresses by Dr. A. L. Evans of Miami, Fla., and Dr. M. F. Hulett of Columbus, Ohio.

Among the other speakers will be Dr. John M. Ogle of Moncton, N. B., Dr. G. V. Webster of Carthage, N. Y., and Dr. C. B. Atzen of Omaha, Nebraska.

Legislative and Educational Conferences at Cleveland

There will be the usual Conference on Legislation and Education. The time is set for 2:30 Sunday, July 24, Hotel Statler, Cleveland. Dr. C. B. Atzen will act as Chairman of the Legislative Conference, and it will be immediately followed by the Educational Conference presided over by Dr. S. L. Scothorn.

Members of the Board of Trustees and of the House of Delegates can ill afford to miss this meeting. If you are not a member of either body your presence is desired as well—that we may get a composite view of what the profession desires for future use.—W. E. Waldo, President, A.O.A.

Don't Get Left for a Room

The week of July 25th is Cleveland's 125th anniversary and it is expected many out of town people will attend the exercises that continue throughout the week.

It is therefore urged that those planning to attend the A.O.A. Convention make their reservations as soon as possible.

The following hotels are waiting to serve you and a line to any one of them will bring a rate card for your convenience in making reservations.

Hotel Statler, Hotel Cleveland, Hotel Winton, Hotel Olmsted, Colonial Hotel, Hollenden Hotel.—C. V. Kerr, D.O., Chairman.

To Get Cases Examined at Convention

"Doctors of Osteopathy desiring clinic material examined during convention by chairmen of various sections, must send case record of such material to chairman of Clinic Committee at the very earliest moment possible."—P. E. Roscoe, D.O., Chairman, Cleveland, O.

New York Wants It

At the Cleveland Convention the Osteopathic Society of New York City will extend a most cordial invitation to the American Osteopathic Association to hold the National Convention of 1922 in New York City.—Thomas R. Thorburn, Chairman of Committee on Invitation.

Dr. Laughlin's College Plans to Open September 1922

Please state in The OP that we will not be equipped and ready to receive students in our new college until September, 1922, as it will take that long to build and equip our building. Some time ago I purchased a very nice piece of ground on which to construct the new building. The architect is now finishing up the plans so that we shall get part of the work done this fall. I have had hundreds of letters from various osteopaths in regard to our new school enterprise. The idea seems to be popular, especially since we plan to conduct the school wholly for the benefit of the students who attend it and in the interests of osteopathy in general. However, it was not made clear in our first announcements as to when we would be able to receive students. I therefore ask you to make this statement for us now.—Geo. M. Laughlin, D.O., Kirksville, Mo.

Adenoids

Adenoids when normal are a protective mechanism of the body. Adenitis is a vegetative extension into the posterior nares, obstructing the breathing. This extension is all that should be removed and the exciting influence causing increase of the adenoids should be found and removed.—M. M. Brill, D.O., New York City.

WHERE THEY GET IT OFF THEIR CHESTS

Is Osteopathy an Adjunct or a Complete System of Physiological Therapy?

By H. H. Fryette, D.O., Chicago.

I see that Dr. Millard has resurrected the old question of adjuncts and pure osteopathy. From fifteen to twenty years ago adjuncts were the favorite topic at our conventions, or wherever osteopaths met, and were a favored subject for those who felt called upon to write. I remember I wrote quite a lengthy article on that subject myself one time after hearing Dr. Hildreth condemn adjuncts and those who used them, but I never sent the article in and I guess the profession never suffered from its non-appearance. We have heard a lot about Simon pure osteopaths, and about ten fingered osteopaths, too. I do not know much history, so I do not know who Simon was. I suppose that most osteopaths have ten fingers, if you are going to number them as they were numbered when I used to study music. As I say, I have heard much of adjunctless osteopaths, much of Simon pure osteopaths, and much of the ten fingered variety. I have not heard these fellows define themselves minutely, but I suppose that they NEVER, under any circumstances, practice anything in any way except what they do with their hands. If I thought that was the whole of osteopathy, I would take the word off my door tomorrow.

It's All in the Definition

The whole question must be settled by the definition of osteopathy. If osteopathy is a system of manual adjustment, and nothing else, then it is an adjunct to medicine, not a complete system of therapy. If osteopathy is a complete system of physiological therapy, the principal part of which is adjustment, then it can have no adjunct, because it is governed by a principle and any and all physiological agencies are a part of it. Why limit ourselves as ten-fingered manipulators, and when we want to use an adjunct, try to crawl out from under by calling it a home remedy? Are we going to adopt all home remedies, of which there are more fool ones than there are unnecessary drugs in a pharmacopea, or are we going to measure our various agencies by their physiological value and use what is indicated without any apology?

The Big Idea is the Biologic Concept

I would hate to belittle the name of the founder of osteopathy by trying to make it appear that what he added to therapy could be practiced with ten fingers. That was part of it to be sure, but the big idea was that the body was self-sufficient; that it manufactured its own remedies when given the proper adjustment, proper surroundings and elements to do it with; that the body must be helped to perform its functions in its own way, but could not be forced to perform them in our way. I wonder sometimes if the medical world, outside of osteopathy, is not getting this idea faster than we are.

Where is the DO with Nothing but Hands

Where is there an osteopath who does not practice suggestion, who does not study diet, who does not recognize the value of proper posture, of proper exercise, the value of hygiene, of sanitation, the necessity of antiseptics, antidotes for poison and surgery? If there is such a man he does not conform to my definition of osteopathy at all, and is therefore not an osteopath, because he does not practice according to the principles laid down

by the founder of the science, but he is something on the order of a masseur or a chiro.

Nutrition Is the Fundamental

The fundamental principles of osteopathy are

based upon NUTRITION (spelled in capitals). Perfect nutrition of every part means perfect health; perverted nutrition spells disease. Perfect posture, perfect adjustment aids nutrition, but does not insure it. It is possible to eat quantities of food and still starve to death. Much work is being done of late by the biochemists. The most important elements of the body are being discovered and condensed, the vitamins have been discovered, and there will be many more discoveries along these lines in the near future. Maybe these vital elements will be put up in bottles, and administered with a spoon!

Not Minimizing the Bony Lesion

In emphasizing the above features of osteopathy, I do not want it understood that I

The Osteopathic Specialist

in

Diseases of the Ear, Nose, Throat and Eye

An incomparable brochure, designed for the use of both the specialist and general practitioner of osteopathy.

This brochure was written in the main by Dr. J. Deason and Dr. T. J. Ruddy, assisted somewhat by HSB, and has been read over and heartily approved by a number of our leading specialists, including Drs. C. C. Reid, H. J. Marshall, J. D. Edwards, W. J. Siemens, K. L. Seaman and others.

These men all say it is a very fine and very serviceable production which has the charm of being *equally* usable by and useful for the specialists in our ranks, and the rank and file of our general practitioners who stand behind our specialists. It will build up confidence for the whole profession by enhancing the respect due osteopathy and will work to retain within our profession multitudes of our patients who now pass over to the medics when they require specialism.

Shipping orders are being accepted for this great campaign number. It is ready to ship in bulk or mail to your list. Already more than 50,000 copies have been ordered in excess of regular edition. They are ordering it in lots of 1,000. Will you use a thousand also?

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am minimizing the importance of the osseous subluxation, for the study of its cause, effect and its correction has been my specialty, my life work, and I am of the opinion that the

majority of osteopaths should follow that specialty; but as a profession we should not exclude or minimize the value of other physiological agents.

Yes, My Brother, the Osteopathic Lesion Is a Reality

By Frank C. Farmer, A.B., M.D., D.O., Los Angeles, California

I am in receipt of the following letter, the contents of which appeal to me so forcibly that I am passing it on to the profession. Just how many others there are of our members who may feel likewise is of the utmost importance. I shall quote only a few of the important paragraphs of this letter and I happen to know that this osteopath has been striving to attain that which he attended an osteopathic school for and which it seems was denied him. Let him speak:

"During the time that I attended the..... school from 1912 to 1915 we had three instructors in osteopathic technique. The particular one who instructed my section spent about five minutes in showing us how to break up a lumbar or crack the neck and the only thing I can remember that he really taught us was that the muscles at the base of the occiput were almost always tender and that was one sure lesion we could always depend upon to find in new patients. Possibly I was a bone head or a slacker, but at any rate, I learned very little adjustment.

"I have been in practice since 1915 and if I have ever adjusted a bony lesion it was an accident. At state meetings and during conversation with other osteopaths I have made it a point to ask "Have you ever really adjusted a bony lesion?" The answer varies, some evading and some admitting they never had. A few give such positive and emphatic answers that I doubt their sincerity. The oldest osteopath in this part of the country in point of service uses a vibrator in each treating room and spends his time talking the particular hobby he is riding at the time, manipulating the abdomen and using the vibrator.

"I have been moderately successful but attribute it more to salesmanship than to any thing else. My income is considerably above the average but I know, even if no one else does, that I have not delivered the goods, osteopathically.

"You quote Dr. Still's "Find it, fix it and leave it alone", and a placard in my office tells me the same thing every day. I have read and studied every thing I could find on the subject and still can't fix it although I can find it without any trouble.

"I am still wondering if it can be fixed after it is found and hope to find an osteopath some day who can readily show me how to FIX IT."

* * * *

This unsolicited letter has come to me. After every reader having osteopathy at heart has drawn in a good breath let us thing over the situation. I am reminded that I have heard the same remarks in various parts of the country and if such a state is at all prevalent, we need look no farther for the reason of many of our shortcomings as a profession.

In the fall of 1917, in company with numbers of devout osteopaths, I paid my last respects to all that was mortal of Dr. Still. Upon that sad occasion the thought occurred to me: "Daddy Still, have we carried on as you would have had us"? I recalled his intensity of purpose, in striving to attain his high ideals. We came from all parts of the world to him to learn and he gave to us unstintedly—never was he too busy—never avaricious for private tutoring, out back of the barn! He gave us his ideas, his science, his philosophy and when his time came to lay down the work, he bade

us carry on with humanity's benefit as our goal.

The above letter is the statement or only one of many and is a sad commentary on how we have carried on. The greater part of the task of promulgating osteopathy devolves upon the schools. Close the schools and osteopathy dies with the present generation. Filling the schools must be done, primarily, by the prospective student being attracted to osteopathy by some one "delivering the goods". Can you imagine the author of the above letter referring any one of whom he is fond to an osteopathic school? He has not "sold" osteopathy to himself—it would be a struggle to convince any one else under those circumstances. Prospective students are impressed with osteopathy the most when they have witnessed what it can do to afflicted mankind. Each osteopath in the field is a billboard for osteopathy and how we succeed in advertising our wares is in direct proportion to how we deliver the goods, osteopathically. Barring some local and minor reasons, attendance in our schools is a barometer showing how well the osteopathic billboards impress the public.

Osteopathic schools that tolerate instructors on their faculty of the stripe above mentioned should have the postal authorities on their necks! Osteopathy would have died "a-bornin" if Dr. Still had taught in this fashion. These practices may all be a thing of the past—let us hope they are, but testimony from the field such as the above is evidence that we are reaping the results of loose teaching.

I have known osteopaths to jump from the graduating platform to the faculty table, from which they proceeded to "expound the gospel" with a profundity gained by pretty near two months practice! Besides, being recent graduates, they could come "cheap."

Little wonder that osteopaths succumb to the wiles of salesmen dispensing all kinds of jimcracks! Failure to succeed by "cracking the neck" indiscriminately, naturally leads to utilizing other methods. I do not blame the osteopath who has made an honest effort to learn and apply osteopathy and has failed because it was not given to him; but the schools have a responsibility that possibly few of them appreciate.

There is only one way to teach osteopathy, and that is to put it across in an osteopathic school—put it across with a punch, not a pardon—put it across with the enthusiasm of a crusader and not with a grouch or apology—put it across without any tails hanging to it, and not hobbled with adjuncts. Osteopathy is as complex as the human body and it takes something more than a passing study to learn and properly apply it, and it takes brains plus experience to teach properly.

There should be a day in the year when members of our several faculties could journey to the osteopathic shrine on the grassy hillside in old Missouri, and at the tomb of the Founder, take note if they have carried on as he would have had them.

Yes, my brother osteopath, the osteopathic lesion is a reality. It is not a myth nor a will o' the whisp. It is more than a reality for within its tangled skein is the secret of untold human agony. You say you often have found the lesion—then you have found the source of unmeasured misery penetrating all phases of

life. You have found the lesion and there, enmeshed in the structural deformity, is blocked the assuaging fluids that nourish, that build. Learn to release this lesion and learn to do it as an artist; learn to do it lightly and without shock to the patient, and out will pour the faltering fluids to enrich and to nourish a starving tissue and with it the gratitude of restored health and the self-satisfaction of service, well rendered. Our measure of success is exactly in proportion to our skill in attaining the ideal in osteopathy. We need thousands seeking to "find it"—thousands, well grounded in the work, "fix it", and thousands with the wisdom sufficiently then to "let it alone".

North Carolina's Personal Freedom Decision

Chief Justice Clark of the North Carolina Supreme Court, in construing the medical laws of the State, said: "The State has not * * * required that, before anyone can be treated for bodily ill, the physician must have acquired a competent knowledge of allopathy and be licensed by those skilled therein. TO DO THAT WOULD BE TO LIMIT PROGRESS BY ESTABLISHED ALLOPATHY AS THE STATE SYSTEM OF HEALING AND FORBID ALL OTHERS. This would be as foreign to our system of government as a state church for the cure of souls. * * * This is a free country and any man has a right to be treated by any system he chooses. * * * All the law can do is to regulate and safeguard the use of powerful and dangerous remedies like the knife and drugs, BUT IT CANNOT FORBID DISPENSING WITH THEM."

X-Ray Showed It

Had a case brought to me a couple of weeks ago that an M.D. six weeks previous had diagnosed as strain of the shoulder muscles. The old lady of 78 years, fell on her left shoulder. One of our D.O.'s treated it and then decided that maybe it was a shoulder dislocation. So when the patient came to me I immediately noticed the flattening of the shoulder where the deltoid usually bulges and under x-ray it showed up beautifully. On talking over the long distance 'J.B.' asked me how I knew, I said I saw it by fluoroscope. MORAL: we Osteopaths don't want to hesitate to use all modern conveniences, especially when they are as plain as the x-ray.—*Fraternally one of your 500, D. H. Hardie, D. O., Galena, Ill.*

AOA Wants Due Credit

I am requested by the A.O.A. officials to call your attention to the fact that on your editorial page you give to Dr. Philip Spence the credit for the amendments to the Fess-Capper Bill ignoring the fact that the A.O.A. had two official representatives at the hearing in Washington, Dr. Conklin and myself, and that the amendments secured were all requested by us in the name of the A.O.A.

It must not be understood that this letter to you casts any reflections whatsoever upon Dr. Spence or minimizes in any degree the fine, big campaign he has so successfully carried out.—*Yours truly, R. Kendrick Smith.*

Baptism of Technique

One simply can't say too much about the necessity of technique these days. It is appalling to me to see the lack of interest that is being shown by some of the osteopaths in regard to real old-time technique methods. That is the crying need in our profession. We need a baptism of technique.—*J. V. McManis, D.O., Los Angeles, Cal.*

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By Carl J. Fillhardt."

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deadly foe to dirt and disease, is a good and gentle friend to healthy cells and tissues.

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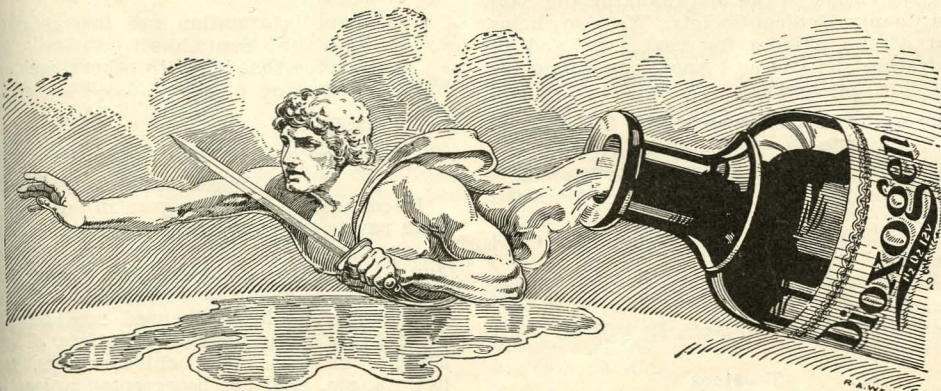
duplicates Nature's methods as no other antiseptic does, since it exerts at one and the same time, potent germicidal action with pronounced stimulation of the

processes of healing and repair.

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indeed, wherever germs must be fought and cleanly conditions established. Dioxogen meets the constant need for a potent but safe and harmless antiseptic, as no other equally effective germ-destroyer ever has.

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W. R. Laughlin, the Only Descriptive Osteopathic Anatomy on the market, \$6.50

Goetz Manual to date, \$2.00

Lane, the Founder of Osteopathy, \$3.00

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Westminster Building, Chicago, Ill.

H. G. ROYER, President
C. O. PAULEY, Secretary and Treasurer

Medics Closing Hospital to Osteopaths Opens Private Home

As the Sangamon County Medical Society objected officially to the use of the local hospital by the Illinois Osteopathic Association at the time of the 22nd Annual meeting at Springfield, May 12th to 14th the hospital's doors were closed to our interesting clinics. However the friends of osteopathy rushed to the rescue and Mr. and Mrs. I. B. Blackstock opened their beautiful home to the osteopaths for holding clinics during the convention. The convention adopted these resolutions of gratitude to their medical brethren:

The thanks of this association are extended to the Sangamon County Medical Society for the kindly fraternal public spirit which was shown us by its action in objecting to our use of St. John's Hospital for clinics. Such action on the part of the medical fraternity is a priceless asset to us as it always serves to further enlighten our friends and the public concerning the historic and friendly attitude of the old school of medicine toward any new school of practice.

In all respects it was a most successful meeting and, considering all factors, the attendance was excellent. The Association went on record for a number of progressive measures. The Association also adopted a new plan concerning dues. We have fixed the dues of the I.O.A. at \$0.00 a year and the Association will pay the A.O.A. dues of its members and appropriate \$5.00 for each member for the districts in which the members live. There are eight districts in the State and it is our hope that this method will assist in building up effective local organizations throughout the State.

The Association has conducted a large amount of legal work in the last year, having defended six cases in the courts, and winning all of them except the one still pending. The expense of this has been over \$4,000. The legislative fight which is still unsettled, has cost the Association about \$2,000 to date. With only 500 practitioners in the State it can readily be seen that it was necessary to increase the amount of our dues.

The Association went on record in favor of the organization of a circuit clinic to embrace the states of Iowa, Minnesota, Wisconsin, Michigan, Indiana and Illinois. It is our hope that we can obtain the co-operation of these states and possibly several more in the organization of such a clinic. We believe this will help build up our district organizations and help the individual practitioners very greatly.

Sincerely yours,

Walter E. Elfrink.

To the Editor:

The above is a very short sketch of the most important things done at our convention. The program as given was carried out as written with the exception that Dr. Fannie Carpenter gave the response to the address of welcome, and the mayor was represented by the assistant States-Attorney. We enclose copy of the resolutions adopted and wish to call your particular attention to the one thanking the Sangamon County Medical Society. We also enclose a list of the officers for next year and the registration. Of course I know you cannot use all of this, but use as much as you wish.

Newly Elected Officers for 1921-1922

President, Dr. C. E. Kalb, Springfield.
President-Elect, Dr. J. F. Peck, Kankakee.
Vice-President, Dr. Fannie E. Carpenter, Chicago.
Vice-President-Elect, Dr. Velma L. Clark, Galesburg.
Secretary-Treasurer, Dr. Walter E. Elfrink, Chicago.
Secretary-Treasurer-Elect, Dr. O. C. Foreman, Chicago.

Trustees

(Date indicates expiration of term.)

First District, Dr. S. V. Robuck, Chicago

(1924). Second District, Dr. Hugh T. Wise, Rockford, (1924). Third District, Dr. Fred B. DeGroot, Rock Island, (1923). Fourth District, Dr. A. E. Daugherty, Bloomington, (1923). Fifth District, Dr. Anna Mary Mills, Champaign, (1924). Sixth District, Dr. L. Alyse Oliphant, Virginia, (1922). Seventh District, Dr. J. M. Fraser, Evanston, (1922). Eighth District, Dr. H. D. Norris, Marion, (1923).

Delegates to the 1921 Convention of the A.O.A.

E. J. Drinkall, Chicago; Canada Wendell, Peoria; C. E. Nedaris, Rockford; Fred Bischoff, Chicago. Alternates: F. A. Parker, Champaign; Anna Mary Mills, Champaign; A. S. Loving, Rockford; C. E. Tilley, Lincoln.

Trustees Chicago College of Osteopathy

(Elected by the I.O.A.)

C. P. McConnell, Chicago, (1925); C. E. Medaris, Rockford, (1924); Hal Shain, Chicago, (1923); J. M. Fraser, Evanston, (1922); J. F. Peck, Kankakee, (1926).

Delegate to Education Conference A.O.A. Walter E. Elfrink, Chicago.

Delegate to Legislative Conference A.O.A. Emery Ennis, Springfield.

Place of next Convention: Champaign.

Postoffice Department Rescinds Boycott of Osteopathy

ORDER NO. 5898

OFFICE OF THE POSTMASTER GENERAL

Washington, May 31, 1921

In connection with the granting of sick leave with pay to the employees of the Postal Service, in accordance with the reclassification act of June 5, 1920, postmasters and other officials are directed to accept certificates of illness only from practitioners regularly practicing in the State or District where such certificate is issued.

The order of May 16th, 1921, which was published in the daily Postal Bulletin, of May 18th, is rescinded.

WILL H. HAYS,
Postmaster General.

All Licensed Practitioners Recognized

Postmaster, ———, Indiana.

In answer to your letter of the 20th ultimo, relative to whether the certificates of osteopaths are to be accepted in the State of Indiana, I have to state that the instructions in regard to certificates of illness published in the Postal Bulletin of May 18, 1921, have been amended and certificates of illness may be accepted from practitioners regularly licensed or legally practicing in the State or District where such certificates were issued.

HERBERT WORK,
First Assistant Postmaster

The above information was forwarded to us by Dr. John F. Spaunhurst, of Indianapolis, so we presume that he, with others, was instrumental in having order of May 16th rescinded.

Section 1—Certificates of Illness

OFFICE OF THE POSTMASTER GENERAL,

Washington, May 16, 1921

In connection with the granting of sick leave with pay to the employees of the Postal Service, in accordance with the reclassification act of June 5, 1920, postmasters and other officials are directed to accept certificates of illness only from regularly licensed medical practitioners, including licensed dentists. The certificates of osteopaths, chiropractors, mental healers, etc., will not be accepted unless treatment by such is prescribed by a medical officer

(Continued on page 30)

EFFICIENCY in PRACTICE MANAGEMENT

The Efficient Osteopath

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

V

Expenses Not Usually Considered or The High Cost of Inefficiency

Let us make an estimate. Just for illustration, we will suppose that an osteopath is practicing in a good town of 20,000. If he is thoroughly efficient in all lines, he should be collecting an average of \$2,000 a month. After many years of studying osteopathic physicians from the standpoint of efficiency covering the various lines and points that can be worked out to advantage, I do not believe that I am over-rating in the above estimate what the efficient osteopath should be doing.

I am rating this in dollars and cents in order to arrive at some concrete basis. I am rating it in character, in pep, in services rendered, in personality, in vision, in progress, influence and power. If I had the language to make it concrete sufficiently to appeal to the understanding of my readers, I could make them appreciate what I mean by expenses not usually considered. Inefficiency is a very expensive handicap to carry about, not only in the loss of money which one fails to collect, but in the loss of character, personality, vision, etc., which I have just mentioned.

Then, for convenience sake, let us stick to the money basis and I will leave it to each one's imagination to estimate the loss in these other lines of his inefficiency. Follow carefully in this rating. Study the different points, trying to find your own deficiencies, then find out how much your added expenses are for allowing your inefficient indulgences.

Causes of Loss

Office

First, bad location. Many doctors voluntarily go to some bad location for their office, so far as the town is concerned. A little jerk-water town with but few people, those people of small ambitions, few improvements, little public spirit and not much money, is not the place for an ambitious doctor who desires to make something out of himself in life, to locate. You may sympathize with and pity the people who live there and are satisfied to have such meager advantages. Unless one is a missionary or an uplifter who specially desires to devote himself to building up communities of that kind and wake up the type of people who live there to their opportunities and privileges in life, one is not under obligation to locate in a place of that kind.

Again, some doctors locate in a good town, but select a place for their office in some part of the city that may be more or less "slummy," or in an undesirable building, or away out in some suburb that spoils their chances very largely because of its bad location. I realize that most anything might do as a make shift for awhile in order to help a doctor who lacks funds to get on his feet. But, he should rapidly change his environment and his conditions, because it is not economy to stay in a bad location.

Second, too few and too small rooms. In order to save rent, some doctors skimp on their rooms and their floor space. They are cramped in their quarters in such a way to make it impossible for them to handle their work efficiently. Naturally, their income suffers as a result.

Third, unhandy arrangement. Some have sufficient floor space, but have not stopped to figure out how to make their rooms fit together

in such a way that the arrangement facilitates the efficiency of their work. Every office should be carefully studied as to its arrangements.

Fourth, dirty, dusty and untidy. The office that is dirty, dusty and untidy has no excuse for its existence as a place in which a doctor should work. One who visits around the country and inspects various offices will be surprised, shocked, and almost horrified sometimes to see the conditions that exist right around and under the feet of a professional man whose business it is to advocate neatness and sanitary conditions. The loss of income that is suffered by many doctors on account of these conditions would many times over hire the services of some good janitor or office assistant to keep away the dirt and tidy up the office.

Fifth, inadequate signal system. An osteopath who expects to take care of numbers of people must have a signal system of some kind by which the patients can be brought in and out of the office promptly. Much time is wasted by physicians who do not have a method of getting their patients in and out of the treatment and dressing rooms. Also, a signal system makes it possible to quietly side-step agents and unthoughtful visitors. No doctor can afford to sit around and entertain visitors or waste his time on agents during his office hours. A buzzer or bell in his room which can be rung at intervals by his office secretary, will give warning to any undesirable caller that time is fleeting, that the doctor is busy, and that people are waiting.

Sixth, lack of proper water supply. A thing that is not handy is seldom used. Water is a thing that must be used by an osteopath almost continuously. He must not only keep his office clean, his instruments and apparatus in good shape, but he must have clean hands. This requires water in abundance, and it must be in a place and brought into the office under conditions which will make it handy and easy to use, both hot and cold.

Seventh, light and heat insufficient. Patients who have to change their clothes and are but thinly clad while taking a treatment should have warm rooms in which to do this. If they take cold a few times in the office they will be anything but boosters for such a doctor. Light is essential to the cheerfulness of any office. Every room, then, so far as possible, should be an outside room where plenty of daylight is obtainable. If this is not possible, all inside rooms should have plenty of electric lighting so that the room will be practically as cheerful as daylight could make it.

Eighth, lack of good ventilation. All doctors, of course, advocate fresh air, and one who does not keep the air fresh in his own office and practice what he is supposed to preach, cannot help but make a poor impression on thoughtful people. Good ventilation is essential to his own well being as well as that of his help and his patients. It also adds to his reputation as one who makes conditions around himself as he would have obtain with his own patrons.

Ninth, bad telephone service. The condition of the telephone system in the city may be responsible to some extent for a bad telephone

service. Many times it is due to the conditions that prevail in the office. The doctor or his help may be visiting at various times through the day and in a protracted way over social affairs or some kind of unnecessary things that should not be mixed up with business hours. This cuts off his telephone from the use of patients. Emergency calls and people who are on the fence as to just whom they should call, if they find the telephone busy, most frequently call some other physician, and they naturally should under conditions of that kind.

Tenth, generally unattractive. The general conditions about the office may be unattractive. Arrangements might be slovenly and inefficient. The general tone and make-up of an office has much to do with the way people feel in the office and about the doctor. All these points should be carefully considered in regard to any office.

Let us all study our offices with a view to correcting everything that is not 100%, even if it costs something in time and money. I am sure what we spend in this way will be largely overbalanced by the increase in income, not to speak of the satisfaction along other lines.

(To be continued.)

Carl In the Limelight

[From Chicago Tribune]

Sir: While receiving treatment the other day from the eminent Dr. McConnel, Osteopath, of Washington St., I inquired of him if he approved of taking somersaults in the morning before breakfast for a very common ailment. He replied: "I do not approve of taking any kind of salts, as they are habit-forming and bad."
—Line-O-Type.

All my life I have ever been ready to buy a better plow.—A. T. Still.

Hank Perkins He Sez: "By Heck, Do You Know -

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CURED NED SLACKPUTTER
OF SAINT VITUS DANCE AN'
NOW HE'S LARNIN' THE
TODDLE



THANKS to Dr. Louise Dieckmann

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DR. E. H. BEAN

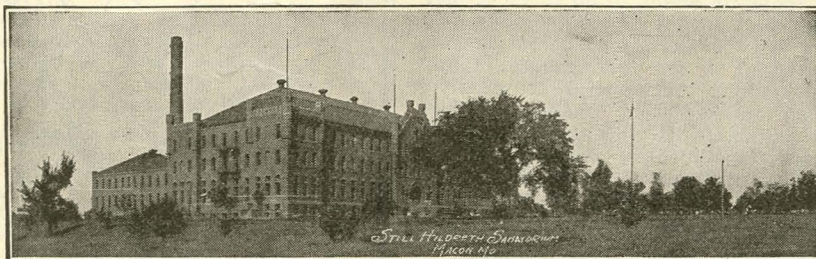
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Building and Holding a Successful Practice

By H. H. Fryette, D.O., Chicago

It is not my belief that any one can tell anybody else exactly the way to build up and hold a successful practice. Many different fields are to be cultivated by many different methods. A method that is natural and becoming to one person may not fit or aid another who may succeed by a policy entirely opposite. I think there is no one way to do it, and so I will attempt no formula which is put forth as a certain bringer of success to any other person.

Still, I know the policies and methods that have helped us in our office, and may be our experience will offer suggestions to the thoughtful student of practice building who is studying over these things and experimenting with them in his own way. What I shall say will be offered rather to aid new graduates who are about to pick locations than be addressed to those who have been a-field long enough to accumulate their own stock of observation and philosophy.

Picking a Field

1. The first great problem is picking a field. What Dr. Still said in his homely way, "If you want to ride a horse get up on his back" seems obvious enough, doesn't it? The application is here: If you want to live and practice in a certain place or a certain kind of a place go there and begin to practice. Don't go somewhere else first and try to make some money to help you to get started in the final field where you want to get started. Don't waste time getting rooted in the place where you don't want to grow up, and don't waste effort and experience trying to do other things than the ultimate thing you mean to do. Go direct to your mark and do the very best you can to improve and grow in your work, and if you put the right kind of pep and interest to it you will succeed whether the field seems to invite success or not.

I remember twenty years ago when my father was making up his mind to go to Madison, Wisconsin, he enunciated this sort of philosophy. They told him it was a bad field and he could hardly hope to make a living there, because six osteopaths had all been

there by turns and none of them could make a living and each had quit the town. The people were too conservative to be "sold" osteopathy, it was said. Father replied:

Well, there is a university there, and a state capital, and there must be a pretty intelligent community there, and there must be enough people who need osteopathy to keep one doctor busy, and so I'm going to live in Madison.

He meant not only to go there but to spend his life there—to live there and do his real live work there. I believe that almost any field the osteopath may select will yield gratifying rewards if taken possession of in this spirit. Under such circumstances one gives his whole energy and enthusiasm to his cases, and that breeds success and no one can stop it. Pick the place and the sort of practice that you like best of all and will be happiest in, and then go to it with no thought of altering your decision or being vanquished.

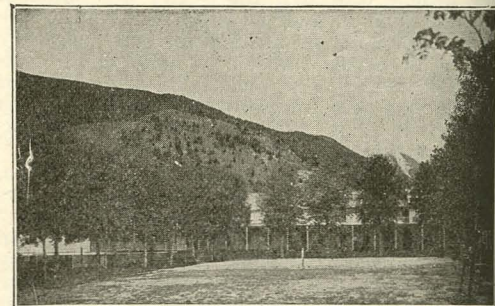
Osteopathic physicians like all other folk are too prone to try to estimate what a field will yield by what they may be able to take out of it. The real measure of what a field will yield is how much of himself the doctor can and will put into it. The thing that determines the yield for the most part is the kind of service given, rather than the objective features of the potential yield itself.

Importance of a Good Office

2. The first and most important thing of building up a practice is to get the very best office available to you. This does not mean necessarily to spend the most money possible for furnishings and rent. But it does mean the most favorable location possible for the end in view—as nice an environment as possible, adequate space for the doing of work properly, and the comfort of your patients,

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and plenty of light and air. These things generally cost more than the want of them saves. They are worth all they cost to you and are well worth going in debt to acquire.

Bear in mind that the patient and prospective patient ordinarily sees your office before he sees you. You and your professional worth are judged by your office. If your grade of service is worth it, any reasonable investment you make to acquire a superior office always comes back to you.

I recall my father's experience twenty years ago in going to Madison where they said six osteopaths had preceded him. He carefully picked the very nicest office obtainable in Madison as his introduction. I have no doubt the six failures that preceded him had avoided that sort of expense. He had little or no money and went in debt to furnish his office. But his office helped to give him the right introduction and as a result his income jumped rapidly from the first month so that soon he was well financed out of his practice income. Having the right kind of office is no small part of making a good beginning in practice.

Practical Talks on Professional Success

By an Osteopathic Layman

Tremont, Pa., May 27th, 1921

Editor, The Osteopathic Physician:

For some time thoughts have stirred within me upon reading what others have had to say in osteopathic journals about how best to advance the cause of osteopathy. The result of my musing is a series of four articles on subjects that appeal to me as being timely and of vital importance to the osteopathic profession. I am sending you herewith these articles hoping you will give them publication.

My son, Dr. Guy L. Barr, located here, is an osteopath. Not only for that reason, but because of the benefit personally received thru osteopathic treatment, I have interest in the advancement of the profession in every way possible.

With best wishes, I am cordially,

Yours sincerely,

N. A. Barr.

Forasmuch as many have taken in hand to set forth thru the columns of your excellent publication, certain hints, suggestions, admonitions and expert counsels as to how best to maintain, all along the line and at all points, the lofty position already attained for osteopathy in the world of human thought, and how most effectively to advance its interest in the future, it seemed good to me to do likewise, having obtained some personal knowledge of its superior merit. So I write of the things which are most surely believed among us as friends and supporters of the method of dealing with human bodily ailments first discovered and announced to the world by Dr. A. T. Still. Although not a physician and therefore not able to speak on the subject of osteopathy with the authority of the trained expert, I have for the past several years been closely associated with osteopaths. I am the father of an osteopath and have also seen numerous demonstrations of its surpassing worth as a healing art. If I have your permission, then, I would like to submit to the readers of The Osteopathic Physician a few thoughts that have been smoldering in my brain for some time. I am writing from the viewpoint of a layman.

How To Succeed

Emerson, the great American essayist and poet, says, "One thing is forever good; that one thing is success," and Beaconsfield, the noted British statesman says, "Success is the child of audacity." There is not an up-to-date, wide-awake, progressive competent osteopathic physician that cannot succeed anywhere on God's earth where there are sick people, if he wisely makes use of right means, and if he tactfully pursues tried and proven methods. The writer of these lines thoroughly believes this to be so because the well-equipped osteopath has something on the other fellow in the

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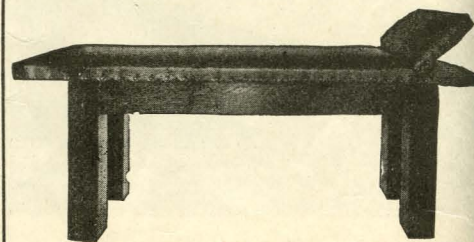
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healing art. If knowing it, and knowing how, determines and fixes the value of a person's service in any calling, then surely the high-grade front-line osteopathic physician need not take a back seat among healers of bodily diseases.

The osteopath who builds around himself a Chinese wall of exclusiveness, cutting himself off and holding entirely aloof from his osteopathic brethren, thinking there is no room for any other osteopath within the circle of his own activity—such an osteopath may perchance in a densely populated community, now and then, succeed in building up a lucrative practice for himself; but, as a rule, he fails even in that and as far as helping the profession is concerned, he is an out and out failure. If all osteopaths were like that, and pursued that method, the world at large would know absolutely nothing of osteopathy.

The writer now recalls an osteopath who had practiced his profession in his community

for fifteen years, and in that time, it is said, had built up a practice that kept him busy, and yet people living several miles from his place knew little or nothing of him. A police officer in his neighborhood, upon inquiry, said that all he knew of him was that he was a skillful performer on a violin, but he knew nothing of him as an osteopath! For the good of osteopathy the fewer there are of such osteopaths, the better it is.

To achieve lasting success an osteopath should never advertise and boost himself, but in season and out of season, everlastingly he should advertise and boost osteopathy, and let his own work advertise and boost him. The afflicted ones which the front-rank osteopath relieves, or cures, and those which another osteopath in his neighborhood relieves, or cures, coupled with tactful heart-to-heart, confidential talks with patients in the treating room, and a judicious distribution of well-selected osteopathic reading matter—of which

there is a rich abundance to be secured at small expense—will bring him all the advertising and all the boosting he can possibly wish for. We have yet to hear of the first case of an up-with-the-time well-equipped osteopath, who adroitly pursued such a course, and failed to win success.

A few years ago the writer thought that such a thing as building up an osteopathic practice worth \$10,000, or even more, a year in anything short of a lifetime, was an iridescent dream. It would have been difficult for him to credit the report of such an accomplishment. But now, by actual demonstration, he knows that such results are possible, and that in the course of less than two years, and that withal, in a sparsely settled and widely scattered community. *N. A. Barr, Tremont, Pa.*

TECHNIQUE

Advanced Technique Used on the McManis Table

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

In this article we wish to point out some of the labor-saving qualities of the McManis table and show that even though less labor or exertion is required by the operator, still the treatments are more effective and beneficial to the patient.

First, the patient who is being treated on the McManis table is in a good state of relaxation. During a treatment in which the operator carries considerable of the patient's weight, the patient invariably tries to help the operator or else is on slight tension from fear of being dropped. With the McManis, the table carries the entire weight of the patient, no matter what position he is in or what technique is being used. For this reason he relaxes better. With perfect relaxation, treatments are naturally more effective because the movement between the vertebrae is greater and the treatment more comfortable because we are not working through contracted or tightened tissues.

Second, the resiliently sustained swinging section of the table permits the operator to carry joints of the spine through their complete normal range of movement without having to support any of the patient's weight. And all of this is done with the patient in a perfectly relaxed condition, or as near relaxed as existing pathology will permit. This all saves labor, is comfortable to the patient, and with the powerful and exacting leverage at hand, makes your treatments more specific and effective.

Third, the raising and lowering of the table, a feature which is not appreciated until tried out, protects the operator's back and places the patient at the proper height for any particular technique employed. Continuous treating on a table with only one height throws the strain on a certain part of your spine at all times, resulting in one set of muscles being over worked, while the others are not used. With a variation in table height all muscles and sets of muscles can do their share of work which results in proper equilibrium of muscle tonicity.

How Big Shall an Association Be?

Having just completed a legislative campaign followed by the launching of an initiative campaign I am of the opinion that an association that has 100% membership has something wrong with it. I would suggest \$120 annual dues for the local, state and national organizations. This will guarantee 100% of interested, active cooperation in all the endeavors these organizations undertake. 100% of motion is worth while; 100% membership always means 50% of motion, or less.—*Chas. H. Spencer, D.O., Los Angeles, Cal.*

The OSTEOPATH

Kansas City, Missouri

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Volume XII

MAY ISSUE

No. 67

Medical Ignorance.	Finger Surgery.
Carbon Copies.	Can Swear Again.
A Splendid Way to Index.	After Fasting Three Weeks.
It Rings True	Conference on Legislation and Education.
Our Fame Spreads.	X-Ray Work at Cost.
Another Osteopathic Sanitarium.	Finger Surgery in the Treatment of Exophthalmic Goitre.
Peculiar Practitioners and Medical Freedom.	Infant Feeding.
Dead-Born Babies.	The Brand Bath.
New Booklets Wanted.	Three Natural Laws.
A New System.	Fees.
"Sleeping Sickness."	Osteopaths Wanted in North Carolina.
Edwards' Class Filling Up.	The Migratory Osteopath.
The Knocker.	Arteriosclerosis.
Boston Physicians Deplore Stillman Doctor's Action.	And 37 Pages of Live Advertising.

Finger Surgery

(Fifteen articles by Edwards, originator of the system, series began in April issue, will run for 15 consecutive months.) Remit \$4.50 and obtain the entire series and several good back numbers—18 numbers in all. Hurry if you want all of this special series, very few back numbers left. Make checks payable to R. H. Williams.

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City Emergency Hospital;
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the making of a successful osteopath. *Address—*

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The Osteopathic Physician

The Organ of News and Opinion for the Profession

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Entered as second-class matter April 7th, 1903, at the Postoffice at Chicago, Illinois, under the Act of March 3d, 1879.

EDITORIAL

Fairness, Freedom, Fearlessness

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

Vol XXXIX June, 1921 No. 6

THIS IS OUR TWENTIETH ANNIVERSARY

Our friends and co-workers in osteopathy will be interested, we believe, to have us call attention to the significance of this June issue of *The OP* in the life history of the science and profession. If you will look at the masthead you will see that it is recorded as Vol. XXXIX No. 6 of the series. This means that the issue completes our first twenty years of service to osteopathy. In other words, this June issue in our 20th Birthday Number. "Osteopathic Health" is a month or two older.

We feel chock full of sentiment over the occasion and would like to write an anniversary editorial, such as the achievement justified, but friends, we are too busy going over the top. We haven't the leisure this month to indulge in anniversary eloquence.

But we are profoundly thankful for the privilege of life, the pep to struggle, the consciousness of a mission in the world's work and the abiding conviction that we have principles to uphold and a good cause to serve.

We are grateful to the profession at being able to say that on this very day that our brief anniversary message is being written we occupy a newly completed \$90,000 office and printing plant here at Waukegan, and that it is as commodious, serviceable and permanent a plant as any printing house in the world enjoys.

We are also profoundly grateful to the profession to be able to say that on the very day of writing this editorial we have sold our last \$100 bond! The whole \$50,000 bond issue has now been substantially over-subscribed, and we are returning the subscription money of all late comers.

Our battery of job printing presses are already busy on the first floor grinding out osteopathic propaganda, and we are today ordering our first big press to be installed for doing our magazine and journal printing.

Last and by no means least of the blessings we enjoy, our whole staff with their families moved out to Waukegan along with the business, and so salubrious are the sun, air, elbow-room, peaceful nights and drinking water that Ralph Arnold has already gained four pounds in six weeks, climbing up from 114 to 118 pounds. That's going some for Ralph. The only rotten thing we have to complain of is HSB's golf score — but everybody's used to that!

So, friends, we enter upon our 21st year of service to osteopathy, hoping that the first 20 years were the hardest, and that the next 20 years will record a wonderful measure of achievement for the science by our whole united profession, in which we hope to be spared to do a real manly part ourselves.

BOND ISSUE OVER-SUBSCRIBED

We're proud to say it—our bond issue has been over-subscribed. All late subscription money has been returned.

We thank our friends and customers for the generous measure of support they gave us and it ought to make them feel proud to realize that we are now settled and busy for the cause in our new steel and cement arsenal.

Those who come to visit us at Waukegan and see our plant at work will realize the solidity

of their investment.

We have our printing and binding machinery yet to purchase and install. We hope to complete this job during the summer.

The latch-string is built on the outside, friends of the profession—come and see us.

We want our bond holders, one and all, to realize that we have an abiding interest in them, and that when we can be of help to them we shall be glad to serve them. One good turn deserves another. Don't forget it. We shall not, you may depend on it.

We Recommend Your Supporting that Saturday Evening Post Campaign

Among the various groups of workers who have addressed themselves to the performance of specific work for the science and profession we believe that none are more courageous or deserving of better support than that Walker-Scothorn group in and out of Texas who are raising \$50,000 to put osteopathy before the world through the Saturday Evening Post. These workers are men of vision and indomitable energy and we should like to see them succeed in completing their fund by the time of adjournment of the Cleveland Convention.

Any successful practitioner can well afford to give \$100 to back up this cause. There is much probability that it will do him personally \$100 worth of good, and possibly much more good by opening the eyes of many people throughout the land to the worth and actual position of osteopathy in the world today. While it is not absolutely sure that any individual subscriber will get his money back in this investment, it is reasonably hopeful; but it is quite sure that institutional osteopathy will derive great and lasting benefit from such an expenditure in the Saturday Evening Post, and if the profession as a collectivity derives such a benefit every individual D.O. might benefit along with the whole profession.

In view of the analysis we gave a year ago of a then proposed "great national advertising campaign for osteopathy in the advertising sections of the magazines"—which we reported on unfavorably and recommended against—some of our readers may think we are reversing ourselves in making this earnest recommendation. Not at all. If it seems so it is because you have not followed the argument closely.

What we opposed a year ago—and would still oppose—was the attempt to pull off "a great national advertising campaign for osteopathy" by buying space in all the leading magazines. A "great national advertising campaign" cannot be bought for less than a million dollars. The *OP* knew that no such sum of money could be raised for that purpose. Therefore we opposed attempting anything clearly impossible.

As advertising men we opposed faking a thing that could not be really achieved by the calling of a comparatively small try-out, as advertising goes,—namely, such a small try-out as was possible to our professional purses—by the more appealing name of "a great national advertising campaign." If we spend \$50,000 in the Saturday Evening Post it must be understood that we are not conducting "a great national advertising campaign." It will be simply a try-out in one medium—the one best medium—and it will correspond only to a "flyer" or gamble-purchase made in the investment field. It would not be fair to ourselves or to advertising as a business to take one flyer at it—like trying out a few sample treatments in osteopathy—to the extent of \$50,000 and then kid ourselves into thinking we had tested and exhausted the possibilities of general publicity. That would be like the fellow who tries one or two treatments and says he has tried osteopathy.

This is primarily what we hammered on in criticizing this "magazine plan" of a year ago. Much discussion meanwhile has cleared the air and brought us all much closer together. Our good friends, Dr. H. M. Walker of Fort Worth, Dr. S. L. Scothorn of Dallas, Dr. P. H. Woodall of Birmingham, and the other stalwarts who are pushing this plan now realize fully that we cannot finance any such thing as "a great national advertising campaign in the magazines" in the usual business and technical meaning of that term. They realize that about \$50,000 is all we can hope to raise for the first try-out and that the results from such an expenditure, whatever they are, will only be a sample section taken from the core of what the world terms "a great national advertising campaign." But they believe that such a fractional part of a national campaign is well worth doing. In this we fully agree with them—now that the air is cleared and we shall fully understand just what we are doing if we go ahead.

The second good reason why we favor this particular limited and highly specialized campaign is because it is to be confined to the Saturday Evening Post exclusively.

We would be just as strenuously opposed to dividing up this comparatively small appropriation among a dozen different national magazines as we were a year ago. Last year when we criticized such a proposition the pages of *The Saturday Evening Post* were not open to us. We quoted the management as on record then saying they would not take osteopathic advertising copy, however friendly they are to our science and profession. But this now has been changed. Our ardent workers of the Society for the Advancement of Osteopathy got the Curtis Publishing Company to reverse its policy on this point and agree to accept our copy of certain conservative sorts, after being furnished with samples and subjects, such as it was proposed to run in *The Saturday Evening Post*. Had the proposition in the first place been to spend \$50,000 on a try-out in *The Saturday Evening Post* and we had had the assurance that the paper would accept such an order, *The OP* would have endorsed and advocated such an expenditure a year ago.

We pointed out a year ago that to run a real national advertising campaign in the national magazines on a par with automobile, food and clothing advertisers would injure osteopathy's standing with the feature, news and editorial departments of both newspapers and magazines. We repeat that as fact today. But we are convinced that the right kind of copy designed for promoting osteopathy collectively, and carried in *The Saturday Evening Post* will not have any appreciable kick back in this respect.

The further fact that the Curtis Publishing Co. says it will accept the sort of copy our boys want to run is assurance that they are going to present the right sort of subjects and handle them in the right sort of way as copy. One of the emphatic points in our analysis of the old plan of a year ago was that various sorts of wrong copy, if used, would do the pro-

fession more harm than good. Of course this is true. But we have had full and satisfactory assurances from Dr. Walker and Dr. Scothorn that they are alert to this fact and that the space to be bought in the Post will be used only for the right sort of copy. This satisfies us that no mistake will be made on that score.

Lastly, the proposition of last year seemed to make the mistake of arising in the attitude of proposing to accomplish what specialty advertising had failed to do. Specialty advertising—the profession's pamphlet and folder literature—had not failed—not in any particular. It had succeeded in bringing the profession as far on its way as it had gotten by that time. Not a tenth of the amount of specialty advertising had ever been used that the situation justified and required.

Therefore the naive proposition—as it first announced itself a year ago—to take over and solve the profession's advertising problem by substituting a small try-out of less certain and less measurable general publicity, to the evident detriment and weakening of the profession's 20-year-old highly organized and successful field literature promotion service, was an amateur's vision purely and would have been hurtful and disappointing to the profession if given experiment.

Now we all understand each other better. The officers of the Society for the Advancement of Osteopathy know that Saturday Evening Post advertising and the using of such field literature as Osteopathic Health do not accomplish just the same kind of work and that one reinforces and helps the other.

The use of general publicity such as the Post affords is calculated to stir up interest and inquiry in a broad way which nothing will so well answer and satisfy as good field literature. General publicity develops inquiries. Specialty publicity goes into detail and furnishes the education. Each helps the other and, properly understood, there is no rivalry between them. They are synergists.

Now that the peril is over of seeing the profession hysterically rush to the abandoning or weakening of its tremendously effective and successful specialty advertising campaign by field literature in order to take a gamble on something new (magazine advertising) which it really understood very much less than it did its field literature, we are happy to be able to endorse the enterprise to use the Saturday Evening Post for a \$50,000 try-out. We do so without reserve, feeling confident that the men who have the enterprise in hand have now studied the situation until they understand it fairly well and that they will not make any real mistakes.

We have much hope that when this first fifty thousand dollars has been spent in the Post that the good results to be felt from it may encourage the profession to subscribe another fifty or may be one hundred thousand, and thus that using of general publicity along with specialty advertising may come to be one of the profession's fixed policies of promotion.

Those Texas boys and all the others associated with them who are giving their money and time so generously to this cause deserve your support. They are working for your good and the salvation of osteopathy as an institution. They have large vision, grim determination and much enthusiasm for this worthy enterprise. Hand them a hundred dollars. You can afford to if you are at all successful. In fact we don't see how any successful doctor can afford not to support their proposition. This does not mean to support the forthcoming Saturday Evening Post campaign at the expense of withdrawing your support from *Osteopathic Health* and its co-working media of osteopathy's field literature armamentarium. Mr. Curtis himself, owner of the Saturday Evening Post, would tell you that to withdraw your patronage from your established field

Some Doctors' Offices

VI

Gloomy Gus

John Barr, D.O.

Having been born with a certain natural lack of dignity, that professional quality has ever had for me the appeal of the unattainable. A particular friend of mine naively admits that his success is largely due to a premature greyness of his hair and a quiet dignity of manner inherited from his mother's side of the house.

Be all that as it may, I am still glad I can smile, even if at the expense of a success-begetting dignity. Not long ago I became acquainted with a confrere who had so enwrapped himself with the cold fogs of dignified reticence, that the interview being over, I was glad to get out on the street once more and find that the sun was still shining.

This man happened to be domiciled in one of these stone-faced city dwellings prefaced with a tiny area inclosed with an iron-latticed fence. Within the fence were a few well-manicured specimens of ordinary grass, apparently growing in spite of the surrounding stone and metal.

An attractive little door-maid let me in and I thought afterwards in what strange places these flowers of humanity sometimes blossom. Coming in out of the sunshine, I was partially blinded by the subdued shadows. Gradually, my eyes regaining their accommodation, I was able to see that the room I was in was a heavily draped, austerely furnished receiving room. It would manifestly be a misnomer to call it a reception room for it was not even coldly receptive, it simply received you while you waited for the doctor to do likewise.

Eventually he did so and I left the coolness of one room to enter the fridity of another.

I made known the purpose of my call which was that of a social professional call, and thereupon sat down as an indication of my sociability, not withstanding a lack of request on the doctor's part to do so. Probably he was estimating in his silence, the amount of valuable time I would consume. While he did so, I tried to form a picture of what he must have been like when he was a little boy and failing in that, tried to estimate the sort of a woman who could have fallen suffi-

ciently in love with him to marry him, for I understood that he had a family. I got as far as a vague sort of clinging vine conception when the measured tones of his deep-set voice assured me that he was duly glad to know me and trusted that I was having a pleasurable journey. I admitted that the journey had been more than pleasant—so far, and left the immediate future to take care of itself.

This it seemed about to fail to do. We had, it seemed, nothing in common. Osteopathy, golf, Dempsey, bridge-whist all went into the conversational discard. Half an hour a day in that office would have enabled Dr. Cook to withstand the rigors of the Arctic without its having affected his veracity in the astonishing manner in which it did.

Learning the year in which he had graduated, I told him of the rather marked success one of his class-mates was having in the application of Osteopathy to a highly specific field. He coldly informed me that his clientele did not indulge in that particular ailment. I failed to discover whether they had an acquired immunity or whether a negative Wasserman test was required before he accepted them as patients.

Dropping back to my old stand-by, I passed out a feeler in the shape of a question as to his technic in certain conditions. Heretofore, this approach has been 100% perfect. But this time it failed, slipped on the ice and tinkled downward into the crevasses of silence.

I too, then became formal and announced my departure. For the first time, the atmosphere lightened a trifle. Somehow, I received an indefinable hint that my host was pleased at my approaching exit. So we did after all, have something in common—a mutual desire to be rid of the other.

As I passed out into the street again, the sun seemed uncommonly bright but my thoughts were still morbid. I could think of but one occasion on which I would care to call this gloomy practitioner. That would be late, very late in a fatal illness. He would make such a fine undertaker.

media to buy space in an experiment in his paper would be foolish. He would tell you to use both. So do we.

We hope, friends, that at Cleveland you will give these lovable and deserving knights of osteopathic advancement the right hand of fellowship with \$100 in it. Instead of feeling jealous of their success we want you to realize that we feel a great deal of encouragement in our own special work for the profession just to see a stalwart band of workers like them get together in a good cause for osteopathy and pull like mad, as they are doing, to put osteopathy over. By hek! we wish there was a society of good folks like them working to increase the use of *Osteopathic Health and Harvest Leaflets*. We believe these deserve such organized support, too, from the profession. But, anyhow,

give your hundred now to the Society for the Advancement of Osteopathy and we feel confident you will not be any the poorer for it or any the less enthusiastic supporter of field literature propaganda.—HSB.

Our Goal

We have endeavored to approximate the truth in all our statements, to accomplish more than we promised, to study our cases carefully, to give honest service for value received, and to make our prices reasonable. We have attracted to us the very highest class of clientele, and have "founded a five-figure practice" in less than three years time.—*Drs. Bauer & Bauer, Delaware, Ohio.*

LETTERS from The OP FAMILY

Pioneer Experiences of a Woman Osteopath in Caribou, Maine

By Dr. Jane B. W. Hall

When I decided to locate in Caribou, Maine, I supposed the townspeople were familiar with osteopathy. I had been told by a one-time resident that several of the leading families were eager to have regular treatments, and I imagined that the need was so urgent that I could scarcely get located before patients would start coming for attention. It sounded most attractive, "expenses made from the very start."

The reality proved sadly otherwise, however; not one of these "leading families" came near my office for over a year. My first patient was a school teacher about to leave town; she wanted a general treatment as she was tired from last days of school.

The second patient was a middle-aged woman with such bad vulvular heart lesions that she might easily have died on the stairs leading to my office. Strange to say she did not expect me to cure the heart trouble since *doctors* had told her that she never could be rid of that. She had a bad cough, however, which none of the "doctors" could cure (the voice implying that I was not a "doctor"!) and she wished me to overcome the cough if I could. She responded well and the cough soon disappeared, whereupon I could not convince her that she was not yet cured and she, being a frugal Swede, considered further treatment a waste of money; so she dismissed herself—only to have the cough return a few weeks later. As osteopathy was "too expensive" for her to get its benefits, she died under drug treatment, "from lung trouble."

The early patients were few and far between and all had been discarded by the M.D.'s as incurables. There were none of these so typically osteopathic as to be cured in one treatment; the soft tissues had to be re-educated to do their proper work before the bony lesions would stay unlesioned, and all too often the process proved too long to suit the patient.

One afternoon a woman, twenty-four years old, called to see what I could do for goitres, as she had had one for seven years and had "tried everything", but the goitre still was with her. It took an hour to answer all her questions and to convince myself that she could not possibly misunderstand the answers. Most especially I emphasized that to get results would require many treatments; that she could not expect to see improvement for some weeks; and that I should prefer not to begin at all unless she wished to give me from three to four months in which to prove that I could help her. She began treatments the following week, came four times then stopped because "mamma could not see as the goitre was any smaller".

A very few patients seemed sufficiently intelligent to catch the reasonableness of the osteopathic principle; a few were desperate enough to keep on trying as long as I held out hope—these all gave good results ultimately and became boosters as soon as the results appeared. One woman thought I cured by gymnastics and was surprised not to find trapezes, rope ladders and other gymnasium appointments in my office. Several thought I represented a type of faith cure. Most of them assured me in no uncertain terms that their backs "were perfectly all right!"

I had some very brief articles printed telling what osteopathy was and wasn't, what it could do, and why. I made them brief because I was

convinced that few of these people were interested enough to read long articles and I knew I must keep the public informed by hook or crook until they believed in spite of themselves. The weekly paper would print nothing except labelled advertisements or locals, and my local items were all too scarce.

Ordinarily I am a peaceful person but my first months here aroused my fighting blood and I lay in wait for the chance to put osteopathy to the front here in ultra-conservative Caribou.

A year ago my chance came.

I appeared in court in an assault and battery case as chief expert witness for the plaintiff, while the defendant, a wealthy Syrian, depended upon the two M.D.'s of the town to show me up as an ignorant fakir. As a matter of fact the M.D.'s were shown to know less of anatomy than I did and the jury rendered a verdict for my plaintiff.

Within two weeks I was called to see a woman, 34 years old, who had been in bed paralyzed for six weeks following a bad throat infection. One of the above mentioned M.D.'s had told the husband that the patient would, in all probability, never walk again; in ten days after I took charge she took her first steps and

made rapid progress from then on. This was loudly discussed, as the case was widely known, and the demand for my work has increased by leaps and bounds since then.

Not long ago the defendant in the law suit before mentioned called me to attend his wife who had suffered two and a half months with acute articular rheumatism. The two pet young M.D.'s had failed to cure the condition and I was summoned because, to quote the man's words, "Dey say you ish some schmart in dem tings." Two weeks of treatment overcame the pain and swelling and the patient was able to be about again. She dismissed herself before she was anatomically cured, but as yet has not experienced any bad results, and our reputation continues for being "some schmart in dem tings".

One woman, operated upon twice for a miscarriage which was not present at all, was left by the M.D.'s to live or die as fate might decree and I was called in as a last hope when the patient was supposedly on her death bed. Interested neighbors said:

"Well, there's one thing sure: Dr. Hall cannot cure *this* case without using drugs!"

But in six weeks the "dying" patient was able to come to the office for treatment and has been increasingly lively ever since—all without drugs in spite of our skeptical friends!

I was recently fortunate in finding a genuine bony lesion osteopath, willing to bury herself alive in northern Maine to help me with a constantly increasing practice, and she was surprised to find me, a country doctor, in remote Aroostook County, as rabidly a bony lesion doctor as herself!

For the past month I have been having a respite from work, but I tell you, that last case I handled was as interesting (afterwards) as any since I entered practice.

[Recently we told of the birth of Dr. Hall's boy baby when the mother was compelled to fill the role of doctor also.]

Surprising Results from Blood Transfusions

By Walter V. Goodfellow, D.O., Los Angeles

Blood transfusions have been used for some time in building up depleted individuals. Because of the necessity of careful laboratory work to determine compatibility of the two bloods, and because of the ever-present menace of haemolysis transfusions have been used only in the most severe cases. It has been the experience of the Doctors of our Group and a few others in the osteopathic profession that small quantities of foreign blood from two c. c.'s to ten c. c.'s injected intramuscularly has a similar building-up effect in cases of depletion from infection or exsanguination, restoring hemoglobin rapidly, increasing coagulability in cases of bleeding and markedly increasing diuresis in cases of anuria.

A recent experience with a mastoid case showing three percent albumen, red blood cells, white blood cells, casts when I was called upon the case, demonstrates the efficiency of blood transfusions. These kidneys were entirely locked with no urination for over forty-eight hours after operation and after resuming activity following blood transfusions, at expiration of one week, the patient developed acute dilation of the heart with failing circulation. Kidney activity was again suspended, uremic convulsions with unconsciousness supervened and death was impending. Five c. c.'s of blood twice daily seemed to play a very important part in the resumption of kidney activity which was preceded by restoration and improved heart action. Red cell count dropped to two million and white cell count went to 40,000 during this period with 40 percent hemoglobin. Red cells climbed gradually and white diminished with the hemoglobin going up to 60 percent inside of forty-eight hours after the twice daily administration of the blood.

I am not prepared to say just why small quantities of blood have such a marked effect upon the body activity. It no doubt is due to the introduction of internal secretions and hormones which have their stimulating effect upon the vital organs and blood making organs of the patient.

No bad effects of any nature have been noticed from the administration of whole blood. Blood has been taken from a variety of individuals and seemingly has the same result. The blood, of course, is digested and does not enter the circulation, therefore, there seems to be no danger of haemolysis. Care should be taken to see that individuals are free from malaria, syphilis and such diseases. Whether any bad effects would result from administration from an infected host is not yet determined.

I would urge others in cases of kidney involvements and severe infections to administer small quantities of blood intramuscularly and tabulate results. The above case recited is making a very nice recovery after being in a condition from which it seemed impossible for any human being to recover. Many other cases could be cited; but this will be sufficient to excite interest in the matter, and I will be very glad for further discussion on the part of those interested.

Think What You're About

If we would only think about what we are doing while we are working, we could accomplish twice as much in half the time—J. Deason, D.O., Chicago, Ill.

Let's Be Up and Touching!

By W. G. Sutherland, D.O., Mankato, Minn.

The admonition "Touch Not" was not written for the osteopathic physician. God made him the instruments with which to *feel*. Let him *touch*. Forbid him not. But, first instruct him *how* to feel. His professional task, in a large respect, is a *finger-task*; that of locating etiological factors beneath, as well as throughout all bodily tissues; being as problematical as is the "searching for a needle in a haystack," and requiring fingers with brain cells in their tips—fingers capable of *feeling, thinking, seeing*. Therefore, first instruct his fingers how to *feel*, how to *think*, how to *see*, and then let him touch. His fingers should be like detectives, skillful in the art of locating things *hidden*. His fingers should be able to decipher the sensation signal-code, found in all tissues along the backbone cable. With the "finger-feel," the "finger-thought" and the "finger-sight," is the only way to read the spinal diagnostic message. The mere tracing by fingers, up and down, here and there, is not "getting in touch" with things hidden—the "hit and miss" not being the proper osteopathic application of tactile sense. His fingers should *pause*, here and there, pressing in deeply to the *deeper* things that concern. Sojourning in a city for a day or two affords more opportunity for an acquaintanceship with the populace than when merely driving through in a Lizzy or a Packard. So

it is with the sense of touch. The fingers should *tarry*, resting firmly, yet gently, yet deeply, on articulations, on ligaments, on muscles, here and there, and thus form an acquaintance with the "populace" in the "burg." The "populace" of the "spinal-burg" are inclined to tattle, and will surely tell the fingers many important things worth while. The fingers should not only *feel while diagnosing*, but also as well, *feel while treating*. It is requisite to hold the fingers "Johnny-on-the-spot" while treating, and follow with their "feel," with their "thought," and with their "sight," throughout the treatment. Osteopathic technique is *governed by and through* the intelligent application of the cultivated sense of touch. And, osteopathic technique cannot be learned by observation—eye-sight cannot observe the sense of touch. There must be a "finger-feel," a "finger-thought" and a "finger-sight," in order to note *how* the lesion moves, *when* it moved, and the change occurring *after*. To learn this art, it is essential to place one's own fingers aside those of the instructor, and follow along with him in the *touch*, in the *what*, in the *how*, and in the *after*. Osteopathic technique *includes* the cultivated sense of touch, and should be *applied* intelligently, both in diagnosis and in treatment. *Get the feeling! Let's be up and touching!*

The Hermits Are Back—On Main Street

[From the Cleveland Plain Dealer]

If the Hermit Club ever chisels a motto over its big fireplace—a motto that will be expressive of the spirit of optimism for which the club stands, it may be this:

Never Mind; It'll Be All Right That Night

For that expression has been the byword and the shibboleth of the club members at the rehearsals for its shows for fifteen years.

Roger C. Enwright might get his wig on wrong at rehearsal, Horatio N. Herriman might fumble his lines, the entire chorus might get off on the wrong key—the cast found consolation in the thought, "Oh, it will be all right THAT night," by which was meant the opening night of the show.

"And the funny part of it was that it always was all right that night," said Dr. C. V. Kerr, Hermit Club playwright.

And now the Hermits are about to go and do it all again. "The Hermits on Main Street" will be produced as the first Hermit Club show since 1914.

The Hermit Club was organized in 1904. The first show, in 1905, was "The Hermits in Holland." The 1906 show was "The Hermits in Spain." These were the shows for the years 1907, '08 and '09: "The Hermits in California," "The Hermits in Dixie," "The Hermits in Africa." After the 1910 show, "The Hermits in Happy Hollow," the club decided to give its shows biennially, instead of each year, because of the time and labor involved in the productions.

The 1912 show was "The Hermits in Paris," and the 1914 show "The Hermits in Vienna." The shows, then discontinued because of the war, are to be resumed in "The Hermits on Main Street," said to be best and biggest show ever planned by the club.

Dr. Kerr has written the books for five of the shows. Perhaps Dr. Kerr missed his calling when he didn't become a professional playwright. Two of his shows, "The Hermits in Happy Hollow" and "The Hermits in Vienna," have had professional productions. "Happy Hollow," rechristened "The Girl I Love," had

a long and successful run at the La Salle theater in Chicago. "Vienna" was renamed "The Dancing Duchess" and produced by the Shuberts at the New York Casino.

"The Dancing Duchess" was not a distinct success. Hermit Club members say the show was tampered with too much in the making over for New York.

Dr. Kerr's interest in things theatrical dates back to his boyhood in Kirksville, Mo.

"An English barnstormer by the name of Robert Darton once brought his troupe to Kirksville," said Dr. Kerr. "The show went broke and all the members drifted away except Darton. He was a nice old man and we all liked him. He subsisted in an attic somewhere on dry crusts, but once a year we got up a show, directed by him, giving the receipts to him. That kept him going. I acted all sorts of roles in Darton's shows, doubling in 'Uncle Tom's Cabin' and 'East Lynne.'"

OSTEOPATHS in the LIMELIGHT

Dr. Asa Willard Has Narrow Escape

[From the Daily Missoulian]

Dr. Asa Willard shudders every time he thinks of it. He was coming back from Helena, Montana, and had been on the platform with a young boy who wore a khaki suit. The youngster had a flat piece of wood and this he dropped when he went into the car. The doctor picked it up and was slapping himself on the leg with it when he in turn went back to his seat. He passed the seat of his companion and saw the latter bending over to retrieve something that had rolled under it. The temptation was not to be resisted; the doctor raised his board aloft and started a healthy swat for the expanse of khaki before him. Something, he knows not what—restrained him on the down-swing. At the risk of dislocating his arm he stopped—

And a benign and grey haired woman straightened up, in her hand the thimble that had rolled under the seat.

Have a consciousness that can be capitalized.—J. Ogden Armour.

Dr. Fraser's Cases Keep Him In the Limelight

[From the Evanston News-Index]

Dr. J. M. Fraser, Davis street osteopath, is a bashful man and it was only by accident that a reporter for The News-Index learned this morning that he has been employed this week as resident physician for Helen Keller, deaf, dumb and blind wonder, who is now performing in vaudeville in Chicago.

Miss Keller was suffering from a cold early in the week and Dr. Fraser was immediately summoned to attend her and his services are to continue until her engagement in Chicago has been completed.

The reporter had already heard of Dr. Fraser's treatment to Mr. G. F. Kauffman, 1957 Roscoe street, Chicago, whom he has taught to talk and for whom he has restored the sensation of taste after a lapse of eight years. As has already been stated, Dr. Fraser is a bashful man and it was with difficulty that he was persuaded to give even the most meager information about Mr. Kauffman, who had suffered a complete paralysis of the tongue, including the loss of taste, the sensation of motion and the power of speech as a result of a throat operation a number of years ago. After a few treatments Dr. Fraser has, by osteopathic stimulation of the nerve centers restored the sense of taste and so far corrected the condition in which he found the patient that he is now beginning to talk and has experienced a new sense of motion and of taste to his tongue.

Dr. J. V. McManis In the Los Angeles College Faculty

Dr. and Mrs. J. V. McManis of Kirksville are now at Los Angeles in the interests of technique and the McManis table. Dr. McManis has been given a place in the faculty of the College of Osteopathic Physicians and Surgeons to teach technique, both that of his own table and straight-table technique. His work is being mighty well received by students and practitioners alike of Southern California.

Los Angeles Clinical Group Acquires a Hospital

I had been wanting to send you information in regard to the hospital here in Los Angeles which recently has been purchased by the Doctors in the Los Angeles Clinical Group, including Dr. Merrill, Dr. Curtis Brigham, Dr. Edward B. Jones, Dr. F. Fern Petty and myself. This is a small hospital which has been in operation for the last twelve or fifteen years at 1035 West Seventh Street, right in the heart of the new shopping district of Los Angeles. It is high and sited and is valuable to us, not so much because of its pretentious appearance and good facilities, as because of its location and because of the hospital permit running in that location. The permit allows sixteen patients which takes care very nicely of our work and some other work besides. It has singles, two and three-bed rooms and has been full to overflowing practically ever since we have got it, February first of this year. Extensive additions are being planned at the present time. Because of the hospital situation here in Los Angeles, as well as over the country, we feel that this hospital may become a life-saver, not only for ourselves but for other members of the profession.—Walter V. Goodfellow, D.O., Los Angeles, Cal.

One Federal Board

A National Osteopathic Board will save time, trouble and money fighting state legislation. Let's have one adjustment instead of 48.—W. M. Kingman, D.O., West Somerville, Mass.

The Osteopathic Post Graduate Efficiency Course

Given by

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REVIEW

A review over many of the most important subjects will be given with the aid of some of the best men and women in the osteopathic profession. Subjects such as, Osteopathic Technique; Eye, Ear, Nose and Throat for the general practitioner; General Diagnosis; Refraction; Dietetics; Gynecology; Orificial Surgery; Medical Gymnastics, etc., will be given.

Many who have taken this course have greatly increased their practice within the first year, and have more than made up for the time spent by getting their work done with greater satisfaction as well as increased income.

Last summer the number desiring to take the course was more than could be accommodated. Those interested should register early in order to be sure of a reservation. For further information, address

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Dr. C. L. Draper
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Trustee

WHERE PEGASSUS BROWSES

To the Fellow Who'll Take My Place
[Sent in by Dr. F. E. Dayton, Escanaba, Mich.]

Here is a toast I want to drink to the fellow I'll never know,
To the fellow who's going to take my place when its time for me to go.
I've wondered what kind of a chap he'll be and I've wished I could take his hand,
Just to whisper "I wish you well, old man" in a way that he'd understand.

I'd like to give him the cheering word that I have longed to hear,
I'd like to give him the warm hand clasp when never a friend seemed near.
I've learned my knowledge by sheer hard work, and I wish I could pass it on,
To the fellow who'll come to take my place some day when I am gone.

When he sees all the sad mistakes I've made and notes all the battles lost,
Will he guess the tears they caused, or the heartaches which they cost?
Will he gaze through the failures and fruitless toil to the underlying plan,
And catch a glimpse of the real intent and the heart of the vanquished man?

I dare to hope he may pause some day as he toils as I have wrought,
And gain some strength for his weary task from the battles which I have fought.
But I've only the task itself to leave with the cares for him to face,
And never a cheering word may speak to the fellow Who'll take my place.

Then here's to your health, old chap; I drink as a bridegroom to his bride;
I leave an unfinished task to you—but God knows how I tried.
I've dreamed my dreams as all men do, but never a one came true.
And my prayer today is that all the dreams may be realized by you.

And we'll meet some day in the great unknown, out in the realms of space,
You'll know my clasp as I take your hand and gaze in your tired face.
Then all your failures will be success in the light of the new found dawn:
So I'm drinking your health, old chap, who'll take my place when I am gone.

—Author Unknown

1870-1922

By Henry Viehe, D.O., Memphis, Tenn.

I'm not wanting in reverence toward time-honored and aged institutions,
Tho we must judge of their merit by the success of their issue.

It's not the moss-grown shingles of the archaic buildings
Nor the hoary-headed fossils, per favor called mentors,
Rehearsing old theories, long taught, not now practiced:
It's not these, but those who went forth from their portals

Diplomated, and typified fit, to contend with
All the ills that humans are heir to.
Much we owe them, and gratefully offer obsequious obeisance.

These we hail and revere, but only as milestones in the lorn lane of progress;
These have with devotion and fealty their Alma Mater pragmatically symbolized,
And served by light such as best a fog-canopied candle would grudgingly grant:
They were respected and trusted as the good and wise Family Doctors.

Vale

However the world may round go and round
It hap'ly does not stand still, neither tarries—
What was accepted as ample and good enough by our forbears

Now no longer satisfies nor complaisantly contents us.
Since time is now counted such a valuable factor,
All science and art must aid the demand
For conservation, prevention,—it's EFFICIENCY'S fulcrum.

Iconoclastic to tenets and dogma of all medics and saw-bones,
Quite skeptic of drugs, mankind's grown insurgent
Where erstwhile quite docile they swallowed their physic.
'Twas cogitating the why's and the wherefore's of perverted function.

Led "Father Still" to discover true premise and prove, it was invariably due to aberrant structure—
The rule of the artery by him proven supreme.
Do you marvel dereliction of him and his kindred
From the Prie-dieu of spatula, mortar, pestle, and pills?

Advertising

Good advertising is poor advertising if it doesn't sell the goods.
Poor advertising is good advertising if it does.—Crosby.

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G. V. WEBSTER, D. O.
Carthage, N. Y.

—ANNOUNCEMENT—

McManis Treatment Tables and Stools will be installed in all the treatment rooms of the Des Moines Still College of Osteopathy by September 1st, 1921.

McManis Table Technique will be made a required part of the curriculum.

Dr. D. E. Pearl, Technician for the McManis Table Company, will be instructor at the College in this branch of the work.

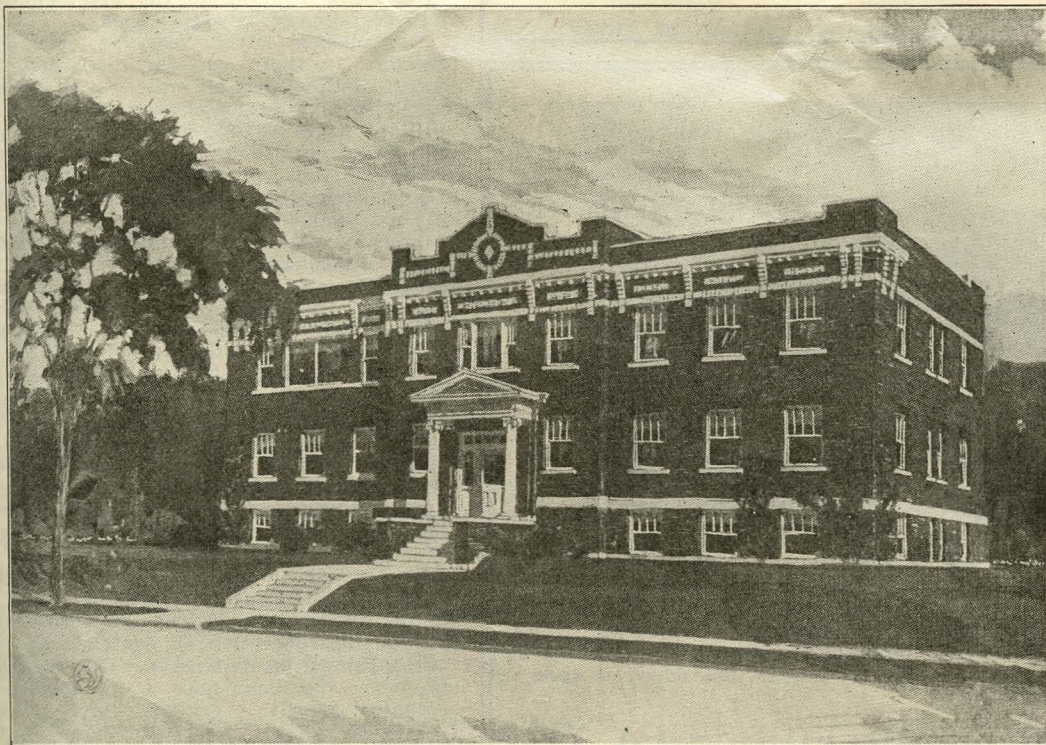
McManis Table Company offices will be established in Des Moines, September 1st, with Dr. Pearl in charge.

Des Moines Still College of Osteopathy is progressive. Its students are to be benefited accordingly by having the very best of equipment installed for them.

The greater percent of the Osteopathic Graduates will use McManis Tables in their work. For that reason they should become acquainted with the tables while in College. Des Moines Still College of Osteopathy offers her students that opportunity.

McMANIS TABLE COMPANY - Kirksville, Missouri

Wonderful Year for the Laughlin Hospital, Kirksville



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

Our first year reveals a very proud record for this new institution. Over 900 surgical cases were handled, just as they came, with a mortality of but three in that number. Receipts for the year were over \$105,000 — practically all of it Dr. Geo. M. Laughlin's work.

Our institution is entirely out of debt and paid for from the receipts of our practice. It is one of the best equipped small hospitals in the state. We maintain a fine home adjoining for nurses. We are prepared to handle successfully all classes of surgical cases and invite the co-operation of osteopaths.

An able staff supports Dr. Laughlin in the following departments: 1. Osteopathic. 2. Orthopedic. 3. General Surgical. 4. Obstetrics. 5. Gynecology. 6. Nose and Throat. 7. Proctology and Urology. 8. X-Ray and Laboratory Diagnosis.

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

Little Stories of the Clinic

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

STORY NO. 28

This is a story told by Dr. W. Curtis Brigham, of Los Angeles, while on the Western Osteopathic Circuit. The story is repeated from memory, and while there may be little inaccuracies of detail, the important ideas I think I can vouch for. Some time ago Dr. Brigham was called in consultation to see a baby about a year old who had been poisoned by spoiled condensed milk. He had been sick over a week, and was very dropsical. His ears were like wax. There was almost a complete

suppression of urine. Both medical and osteopathic experts had done what they could, and yet the life of the child seemed ebbing away. Dr. Brigham said that it was very evident that it was necessary to do something different than anything done by the experts in charge, if the life of the child was to be saved, and his "instinct as a physician" led him to take 5 cc of blood from the brachial vein of the child's father, by the use of a large sized hyperdermic needle, and then immediately

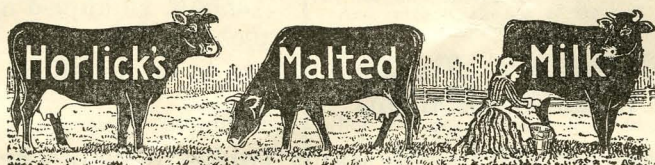
thereafter with that same needle inject that same blood under a pectoral muscle of the baby. Later, other transmissions or injections of blood were made in the baby in like amounts, and in like manner. Not long thereafter the baby had copious discharges from the bladder, and he made full recovery.

Comment No. 1. Dr. Brigham states that this treatment has since been given to numerous cases of dropsy, anemia, extreme prostration, shock, and suppression of urine, with remarkably successful results. In several cases life was saved.

Comment No. 2. The doctor says this treatment seems to work, wherever transfusion of blood has been of benefit, with the advantages that only a very small amount of blood need be taken from the donor, the character of the blood of a healthy donor does not need to be tested, and the transmitting of the blood is a very simple matter. In some cases the amount injected is as small as 1 cc.

Comment No. 3. Dr. Brigham evidently has made a very valuable discovery, and yet he has made no announcement in our journals. Scores and scores of other splendid workers in our profession have also made discoveries that would add many laurels to our crown, but lack of time or condemnable modesty prevents prompt announcement of these discoveries.

BUILDING FOOD FOR ALL AGES



The ORIGINAL

A very useful and reliable adjunct to Osteopathic treatments, for patients requiring a prescribed diet.

Avoid imitations of the ORIGINAL product of reliable quality.

Samples prepaid upon request.

HORLICK'S MALTED MILK COMPANY
Racine, Wis.



We accept all kinds of hospital cases, except Communicable and Mental Diseases. A purely Osteopathic institution. Chartered on a non-profit basis. Modern equipment in all departments.

Our Training School for Nurses is accredited by the State Nursing Board. Our course of study is far in excess of the requirements. Nursing is unequalled as a profession for young ladies. We desire to enroll a new class of at least one dozen at once. Write for information and application blanks.

SOUTHWESTERN OSTEOPATHIC SANITARIUM
Blackwell, Oklahoma

Finger Surgery

I am now arranging for a trip to Europe to give Finger Surgery to our practitioners over there. Have been invited by doctors in Glasgow and London to hold clinics this summer. This I shall do immediately following the Cleveland Convention. Hence the private class as advertised in the Osteopath; I hope to make enough out of it to pay my expenses abroad. You know, I was born and raised in Cardiff, South Wales, Great Britain, and three of my uncles are prominent English surgeons. I am invited by them to meet the Royal College of Surgeons and explain osteopathic Finger Surgery. Only last month I was asked by a leading New York Medical journal to write a series of ten articles on Finger Surgery. This, of course, I refused to do, but the idea suggested the series of fifteen now running in the Osteopath, which will be followed by a text book.

Our medical friends are now using Finger Surgery in their eye, ear, nose and throat work. Both of our big universities are teaching it to their senior classes. Ballenger's 1914 edition, pages 684-87, gives the discovery of Finger Surgery to Drs. Thos. H. Brunk and W. S. Bryant, but yours truly gave it to the St. Louis Osteopathic Society in the fall of 1911.

I am unable to find anything in osteopathic literature relative to the dilatation of the eustachian orifice, nasal cavity, external canal, orbital cavity, and the treatment of the soft palate and deep laryngeal tissues by Finger Surgery until I gave it to the profession. Several of our specialists are attempting to claim priority. It is not a question as to who discovered it, but what is best for osteopathy. If you fail to use the term "Finger Surgery" in your manuscript, you are omitting the big punch and best publicity medium osteopathy has ever had.

"In science the credit goes to the man who convinces the world, not the man to whom the idea first occurs. In other words the doctrine of laches holds in science as well as in law. Whoever fails to exercise his rights loses them in law. So in science the claim of priority falls if the claimant is guilty of laches in failing to impose his conception on contemporary scientists. Knowledge is useless unless disseminated, hence the importance of the scientific and technical press in every field, for it is through this medium that new truths may be widely disseminated."—J. D. Edwards, D.O., M.D., St. Louis, Mo.

Be a part of, not apart from your organization meeting.—New York Osteopathic Society Bulletin.

SHOP TALK on MATTERS of PROFESSIONAL INTEREST

A Thought That Helps Me

As an osteopathic physician my efficiency and pleasurable practice depends on how well I understand the functions of the brain and the functions of the centers of the sympathetic nerve. By freeing these nerve influences by osteopathic manipulation, abnormal functioning comes nearer and nearer to the normal, and much gratification follows. This has been my best regard for every-day professional life. Its truthfulness encourages me to keep on.—A. A. Roland, D.O., Greenville, Ohio.

Policy for New Graduates

For Graduate Student's Immediate Future Every graduate student should examine his or her bank account, and if the same does not show balance of at least \$1,000 or if he is unable to raise at least said amount on long time notes, then he should refrain from starting independent practice until this sum somehow is raised. With this sum in his possession, at least \$500 should be spent in legitimate advertising, the first two years of practice.—L. C. Stern, D.O., Saint Paul, Minn.

Colon and Rectum

One of the most important points of the examination, and one that is more often overlooked is the examination of the colon and rectum. All we are accustomed to doing is ask a few questions, and take for granted that what they tell us is true. If we would make a thorough examination and clean up the pathological conditions found, we would cure more of our nervous patients, and in place of knockers we would have a following of BOOSTERS.—C. H. Hancock, D.O., Mineral Wells, Texas.

A Toast to Mr. Gray

Here's to Phillip H. Gray. What a wonderful vision the man possesses! I envy him his satisfaction as much as I honor him for his beneficence. I doubt if it would be possible for one to get more real pleasure and satisfaction out of any other investment than will be Mr. Gray's portion from his generosity to humanity

through the Detroit Osteopathic Hospital.—Harry W. Gamble, D.O., Missouri Valley, Iowa.

Let's Go!

Suggestion to osteopathic patients: You can look and listen after you are dead—i. e., A.O.A., July. Be there!—I. L. Drennan, D.O., Warrenton, Missouri.

**ASHEVILLE
OSTEOPATHIC SANATORIUM**

Asheville, North Carolina

- Best Climate in America
- Best Water in America
- Best Scenery in America

Here your patients may have osteopathic care and a pleasant stay in the mountains during the hot months.

Elizabeth E. Smith, D. O.

HOW I TREATED MY OWN CHILD

(Name to doctors on request)

Fergus Falls, Minn., Nov. 5th, 1920

The Dionol Company,
Detroit, Michigan.

My 4-year-old boy, Frederick, pulled the cord of our electric heater and tipped a pan of boiling hot water on his arm and hand. My wife used the best dressings she had but the poor boy found no relief. She could no longer endure to see him suffer so frantically with the pain, and phoned for me. I applied Dionol and in about ten minutes the pain stopped, and there has not been any pain since.

This burn was very deep, and of course we thought it would leave a big scar, but do you know there will not be a sign of one? It is all healed up and one would never know that he had been burned at all. We obtained all these results in less than three weeks. I never saw such results in all my prac-

tice. Me for Dionol every time. I am surely grateful that such a remedy is on the market.

Dr.....

Another Case

Philadelphia, Pa., Feb. 8th, 1921.

The Dionol Company:

Within the past week I have had an opportunity to test Dionol in an aggravated x-ray burn case which was referred to me by a brother physician who had stopped his treatments owing to skin sensibility. I wish to compliment you on your splendid preparation. I have the burns under control and am now continuing treatment without fear of further inconvenience to the patient.

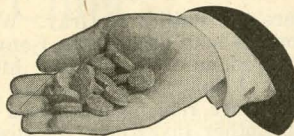
Dr.....

DOCTOR: Don't forget that Dionol gives equally positive results in local infections, wounds, leg ulcers and ulceration generally, and wherever local pyrexia is present. Try Dionol also for tampon treatments, piles, etc. It is exceptionally effective.

THE DIONOL COMPANY, (Dept. 12) Garfield Bldg., Detroit, Michigan

DOCTOR—HERE IS A HELPING HAND!

WHY NOT USE Bran-O-Lax?



Gilbert's BRAN-O-LAX is used extensively by Osteopathic physicians and hospitals in treating patients for constipation, indigestion and internal disorders, BRAN-O-LAX combines the merits of all other wheat bran preparations. It is in the only logical form—that of a condensed tablet, sanitary and convenient. They will keep indefinitely.

BRAN-O-LAX is a light food diet for the sick and convalescing, as well as a gentle laxative. BRAN-O-LAX contains one heaping tablespoon of plain nutritious wheat bran. In eating four or five tablets, you will have taken into the stomach more wheat bran than if you had eaten one half loaf Graham or Whole wheat bread. 1 Box 25c Post Paid U. S. or Canada.

5 Boxes \$1.00 Post Paid. Prices in quantities on request.

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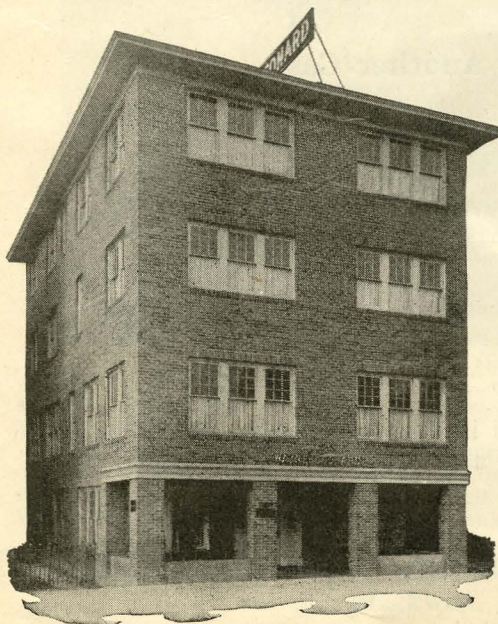
had the above student gain for 1920-1921.
Nearly tripled its enrollment and now starting
for a more remarkable record for 1921-1922.

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

We employ the Porter Milk Diet Method exclusively.

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

For particulars regarding milk diet and other cases, address—

Dr. L. H. English

130 South Maryland Ave.

ATLANTIC CITY

N. J.

Are You an Aphis?

Every one seems to be telling you what they think of themselves and their profession. So here is mine. Just short and sweet. Just about half of the osteopathic profession are a bunch of rank "pikers." By that I mean simply this: They are sticking to the old plant and sucking her dry like a bunch of aphides on a melon vine. They give nothing and care nothing for the future generations in osteopathy. Here in my own state of Connecticut there are about three of us who are trying to spread osteopathy by every means; we have used Drink-all's film, given away hundreds of Woodall's book, have sent hundreds and thousands of the AOA booklets broadcast, have stuffed the news full wherever a chance offered. Three, I say, have done it. The rest think they are going strong if they buy three or four books to give to a library or two and talk of going broke when someone talks of \$10 to support a moving picture program for osteopathy. And, mind you, some of these fellows are pulling down a five figure income. They are sucking out all they can get but they won't tell the uneducated masses what osteopathy stands for and never send a student to the schools for fear they will come home to compete with them Mayo says the osteopathic profession is surely doomed and he is right unless we can cut loose from our aphis piker attitude and educate the people and do it fast.—A. B. Sturgis, F.S., D.O., Wallingford, Conn.

Getting Into That Shrine Hospital

Acting upon the advice of Dr. Kendrick Smith of Boston, Mass., I am today writing all the osteopathic journals in regard to osteopaths practicing in the new Shrine temple which will be located in St. Louis.

Each member of the Shrine is taxed \$2.00 annually to build and maintain this hospital, which will be a wonderful monument and representation of the order. This hospital will be specially devoted to the treatment of crippled children and while we have had the assurance of several members of the committee that the osteopaths would be dealt with fairly in regard to practicing in this hospital, I believe that we should get a Shrine member in each town and city where a Shrine temple is located, to petition the different members of that order to allow osteopaths to practice in the Shrine hospital, and this upon an even basis with any other profession. I do not believe that there is anything unfair in this proposition and if the osteopathic profession wants representation in this hospital, they will have to show that the interest of members of the order so wish it.

I am asking that each magazine print a notice to this effect, asking the osteopaths in the different cities where Shrine temples are located, to get in touch with me as soon as possible.—F. H. Healy, D.O., St. Louis, Mo.

**St. Joseph Osteopathic Hospital
Winning Out**

The osteopathic hospital here is doing finely. Patronage has gradually and steadily increased. The M. D.'s boycotted our hospital but it's going ahead in fine shape. The AMA is really taking its own medicine and doesn't seem to know it is in a hopeless condition and killing itself.—M. L. Hartwell, D.O., St. Joseph, Mo.

Substance vs. Shadow

The thinking public know how to distinguish the "Simon Pure" ten-fingered from the camouflaged type; the former assuring the representative thereof of success, both physically and financially.—C. W. Rothfuss, D.O., Detroit, Michigan.

[The July Osteopathic Health]

The Osteopathic Specialist

in Diseases of the

Ear, Nose, Throat and Eye

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Big Value Package for \$5.50

We have been straightening out our stock brochures since we arrived at our Waukegan plant. We find we have some odds and ends which we desire to dispose of quickly. We have laid aside a number of packages, each package numbering 150 brochures and containing at least some of each of the following:

"An Osteopath's Explanation to a Health Seeker," "Questions Often Asked About Osteopathy and Their Answers," "How a Case of Sleeping Sickness Found a Cure," "Osteopathy in the Inflammatory Diseases," "A General Sketch of Osteopathy," "Osteopathy Potent Where Serums and Vaccines Fail," "Osteopathy in Winter's Ills," "A. T. Still as a Medical Thinker," "Most Diseases are of Spinal Origin," "Osteopathy as a Science," and "Osteopathy Cures Various Nervous and Blood Disorders."

While they last, or for a period limited to not longer than 30 days, we will sell these assortments at \$5.50 per package, "as is." You can have one, two or three packages, but the rate per package is the same. If it is requested, we will imprint professional card without charge.

If you want to do some campaigning to a new list of names, here is your chance to get the literature for it at a low cost. You can send us your list if you wish and we will do the addressing and mailing for you. The extra charge is 50 cents per hundred for addressing and \$1.00 per hundred for postage. There are about 50 of these packages. They will "move away" quickly, you may be sure. If you want one or two of them let us have your name and remittance promptly.

The Bunting Publications, Inc.
Waukegan, Illinois

Kansas Does Not Recognize Mixing Schools

At the February, 1918, meeting of the Kansas State Board of Osteopathic Examination and Registration, this resolution was passed: "Resolved that the Kansas State Board of Osteopathic Examination and Registration does not recognize any school of osteopathy which confers both the degree 'D.O.' and 'M.D.' This to apply to all graduates after July 1st, 1918."

At the February meeting this year, 1921, we had two applicants from such a school, and we refused to issue certificates to said applicants, on the ground that we did not consider that they graduated from a school of good repute. We took the matter up with our Attorney General and got a sustaining decision. The sooner this mixing business is stopped the better it will be for osteopathy.—F. M. Godfrey, D.O., Topeka, Kansas.

Connecticut Wants Osteopaths

The state of Connecticut wants more osteopaths. We need them badly. I write not from the standpoint of your professional men in the state but as a plain business man who finds a great demand with few to fill it.

Here are a list of fine old towns in Connecticut which have no osteopathic physician and need at least one each—places where a good man (not a piker or cheap one) can get a good general practice.

Ansonia 17643, Branford 6047, Bristol 20620, Colchester 2140, Cromwell 2188, Derby 11238, East Homer 3000, Enfield 11708, Guilford 4000, Killingly 8178, Litchfield 4000, Manchester 18-370, Naugatuck 15051, New Britain 59316, New Milford 5070, Plainfield 6719, Plymouth 5021, Rockville 7980, Seymour 4786, Southington 5085, S. Manchester 8075, Stafford 5833, Stonington 9154, Startford 5712, Vernon 9085, West Haven 12369, Wilimantic 12330, Winchester Center 8,679.

Here are a few large cities with only one or two osteopaths apiece where there is room for five or six.

New Haven 180,865, with 3 osteopaths; Waterbury 91,490, with 2 osteopaths; Bridgeport, 143,152, with 3 osteopaths.

Send on your good young osteopaths but send good ones.—A. L. Preston, New Haven, Conn.

A Just College Aim

The unity of the osteopathic colleges for a purpose—to qualify a student to go anywhere, and not work for any selfish motives.—Montague & Rieger, D.O.'s, Muskogee, Oklahoma.

The Perfect Sight Restorer

Dr. Cole's



For treatment of the eye. The eye cup fits over the closed eyelid, and by suction manipulates all structures of the eye, moulds the eyeball into its normal shape, establishes circulation of blood, and normal functioning of the nerves. Restores vision in far sight, near sight, Astigmatism, causes absorption of Cataracts, relieves attacks of vertigo, sick headache, nervousness and other conditions which are due to eye strain. The P. S. R. is made of polished hard rubber, cannot wear out nor liable to get out of order. Guaranteed to give satisfaction if used according to instructions

Write for descriptive literature.

PRICE \$5.00

PERFECT SIGHT CO.

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Special Information for Osteopaths

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

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

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

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



The Delaware Springs Sanitarium

Emphasizes *Diagnosis*, believing that a condition accurately diagnosed is half cured.

All modern facilities for diagnosis, as well as treatment, are found in our equipment.

Our institution has been inspected and endorsed by many of the best men in our profession.

THE DELAWARE SPRINGS SANITARIUM
Delaware, Ohio

Don't Complain of Unfair Competition

Unless you are doing your part to smoke the imitators out. You can use "Chiropractic Kleptomaniac" in hundred lots at 1½ cents apiece. It pays.

California's Steam Roller

The osteopathic bill introduced at the recent session of the California Legislature met the most tremendous opposition ever employed against an osteopathic bill in this state. Even so, it would have passed, had it not been for the terrific political pressure from the governor's office brought to bear on a few Senators who were ready and willing to vote for the bill. The story from "TEAM WORK" gives further details about the fight.—*C. B. Rowlingson, D.O., Los Angeles, Cal.*

Pus, Pressure and Poison

If it is true, as Ruddy says, that disease is caused by the three P's—pus, pressure and poison, osteopathy occupies a sounder position in treating disease than any other school of healing just because we recognize all three as causes. Our old friends, the enemy, admit but two, pus and poison. Our newer rivals, if orthodox, have but one, viz. pressure. Business firms today strive constantly to expand and to improve their "service." Doesn't the physician render the best "service" who is on the lookout for all three causes and who does not make the dogmatic pronouncement that there can be only one or two? This question, tho simple, is fundamental and improves our standing with thinking people.—*R. F. Robie, D.O., Oakland, Calif.*

Diabetic Information

Every osteopath should buy "A Diabetic Manual," by Dr. Joslin of Harvard University. This small book outlines very clearly, the latest treatment, fasting and diet for mutual use of patient and doctor.—*E. C. Deming, M.D., D.O., Edmonton, Alta., Canada.*

Sincerity

The thing that we most need in the discussion, at our meetings and conventions, of questions involving our stand on public policy, is an *honest* expression of opinion. When a D. O. voices his opposition to drugs, serums, etc., and I know that this D.O., on the quiet, is using them, it gives me a pain. We shall never get anywhere if we talk one thing and do another. We ask of others that they shall judge of Osteopathy's claims with open mind, and yet, when our medical brothers propound a healing method backed up by carefully thought-out theory and statistics we close up mentally like a clam. I am not making a plea for either drugs, serums, or vaccines. I am asking for less publicity in our public attitude on these subjects.—*Howard T. Crawford, A.B., D.O., Boston, Mass.*

Is General Treatment All "Bull"?

Go away back and sit down while thinking of all the so-called "cures" you have made, for you never made one. The best place you ever were allowed in the program of nature's efforts was to become her assistant, and the sooner you get it into your head that you are an assistant the sooner you will be of some real use to Dr. Nature. When you can't do some definite one thing to help, don't go to general treatment—it's "Bull."—*F. A. Piper, D.O., San Antonio, Texas.*

The Right Allotment

Use hours for diagnosis. Minutes for treatment.—*E. H. Henry, D.O., Kirksville, Mo.*

Do We Need Another College of Osteopathy?

I have read the "Osteopathic Physician" and Dr. Laughlin's proposition of an A. T. Still College, an institution run purely without profit and, I presume at Kirksville, although he does not say so.

Let us consider what the result of such a school would be. It might be well first to consider the splendid idea which Dr. Laughlin has in mind. It cannot be questioned by anyone in any way—building a monument to the beloved founder, devoting half his individual time and giving \$150,000 to that monument which would be a college of osteopathy. To make it a success he would have to put into it years of hard work, time and money. What would be the result? We already have a school at Kirksville founded by the illustrious Dr. A. T. Still to the honor and development of the science that he so splendidly studied and named.

Now the question comes, would Dr. Still, if he were living, want a school erected in his memory and endowed in his honor at Kirksville which would, to a certain degree, be in competition and strife with the school he founded?

Dr. Laughlin speaks of a school without stockholders, the earnings of the school to go back into it for equipment and new buildings. The profession might ask the question, "What funds would the school in itself be able to save out of the general running expense of the students' tuition if they did not have in connection with that school the general hospital, the obstetrical hospital, the eye, ear, nose and throat hospital, and the infirmary?"

If we were to ask the men who are at the head of the business and financial as well as the educational departments of our present schools if they were making money out of the school itself we believe they would answer in a chorus, "No". We have to put into the school to educate one individual, or the students collectively, more money than their tuition costs them.

If we were to ask these same men, "Do we need another college of the type and nature located at Kirksville that Dr. Laughlin speak of?" we believe again they would say, "NO".

If Dr. Laughlin wishes to found a school as a memorial to Dr. Still would it not be well to take over one of the schools already working? Of course, living in Chicago, we would suggest that it be the Chicago College. We would say to the Board of Trustees, the profession of the State of Illinois and the Northern Central States, "Tell George to come up to Chicago, the greatest commercial and educational center in the United States, with all the chances to build to the founder the largest memorial that could be built in any spot in the world, and we will help him to found the school. We will give him years of work and sacrifice, buildings, and equipment and we will co-operate with him by giving our money, our time and our experience to develop a school, dedicated to our illustrious founder, Dr. Andrew Taylor Still.

There would then be no question regarding the future life of the science of Osteopathy.—*Ernest R. Proctor, D.O., Chicago.*

To Remove Adhesive Plaster

I was just reading about how to remove adhesive plaster in a medical journal. I thought it might be well to tell others how to do it. I generally use straight ether poured under the edge. First, start a small portion at the edge, then drop your ether drop by drop. No discomfort to patient. Some men I know use equal parts of ether, chloroform and alcohol. This is not new and doubtless many know it.—*D. O. Atkinson, D.O., Fremont, Nebr.*

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Practice limited to General and Orthopedic
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Detailed diagnostic report and complete instructions as to advisable treatment returned by mail to physicians.

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

Dr. O. R. Meredith,
Nampa, Idaho

April 9, 1921

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

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

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

Yours for an osteopathic literature,
O. R. MEREDITH, D.O.,
President of W.O.A

Get your copy before it is too late!

Price \$3.00

The Bunting Publications, Inc.
Waukegan - - Illinois

Rocky Mountain Osteopathic Hospital Scores Success First Year

A brief report of the Rocky Mountain Osteopathic Hospital's first year's work may be of interest to those of our profession who are contemplating starting such an institution. Our association was very fortunate to secure a hospital already re-built for that purpose; so, buying the building and installing new equipment meant an outlay of \$20,000, all provided for except \$7,000 which I might say is in good hands.

The Osteopaths raised \$12,000 and laymen have helped to the extent of \$16,000. We are planning a campaign to canvass the laity on the basis that we are an eleemosynary institution, that other institutions of the city do not admit osteopaths, should they need hospital attention they could not receive osteopathic treatment. All cases are to have post-operative treatment, etc.

The year's report shows nearly 500 cases of all classes admitted with less than 1½ percent death rate. Receipts for the year from patients \$19,975. The hospital operated for the twelve months ending April 30th, at a loss of \$90.53. The average cost of meals were 20 cents each. The number of beds in hospital 25.

A large measure of success in this venture is due to our surgeon and general manager, Dr.



W. L. Holcomb.

Staff

Diagnosis—Dr. G. W. Perrin, Dr. J. A. Pickard.

General Osteopathy—Dr. D. H. Craig, Dr. Martha A. Morrison.

Nervous and Mental Diseases—Dr. Albert Luden Bondy, Dr. H. H. Poole, Dr. Daisy E. Walker, Dr. R. M. Jones.

Dietetics—Dr. R. R. Daniels.

Pediatrics—Dr. Jenette H. Bolles, Dr. Mable C. Payne.

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Surgery—Dr. W. L. Holcomb, Dr. Robert H. Buck.

Eye, Ear, Nose and Throat—Dr. C. C. Reid.
—Yours truly, Geo. W. Perrin, President.



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

"Osteopathic Health" for July

The Osteopathic Specialist in the Diseases of the Ear, Nose, Throat and Eye

The Osteopathic General Practitioner and the Osteopathic Specialist; Osteopathic versus Medical Specialists; Tonsillitis an Example — Non-Surgical Treatment; Tonsils and Adenoids in Children; Sinus Infections; Nasal Operations; Hay Fever; Deafness; Eye Strain—Effects on the Body—How Cure Restores Health; St. Vitus' Dance and Chorea; Headache; Migraine and Nervous Debility; Strabismus; Eye Diseases.

The above is the title contents of "Osteopathic Health" for July. A copy of this interesting little magazine will be mailed free of charge on request. It explains in clear simple language how osteopathy normalizes many forms of deafness and defective eyesight.
Address

DR. _____, _____

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DISEASES of the HEAD and NECK

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Giving the Author's original methods in diagnosis and Osteopathic treatment of—

1. Catarrhal Deafness.
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8. Facial Paralysis.
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Originator of FINGER SURGERY
in Hay Fever, Catarrhal Deafness,
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Impairment. Practice Limited to
Eye, Ear, Nose and Throat Diseases.

Over Five Thousand cases treated, 90
per cent of the patients responding to
this new method of treatment.

Referred cases given special attention,
and returned to home osteopath for fol-
low-up treatments. Hospital Accommoda-
tions.

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PUBLISHER'S DEPARTMENT

That Great "Osteopathic Specialism" Brochure

Something new in osteopathic field literature is our excellent brochure, now available as the July installment of *Osteopathic Health*, called

"The Osteopathic Specialist in

Diseases of the Ear, Nose, Throat and Eye"

We are proud to put this out and feel that it will do you a really valuable service if you use it extensively in your field.

The main body of this brochure was written by Dr. J. Deason. Dr. T. J. Ruddy collaborated and wrote a fractional part of it. HSB did the carpenter's and joiner's work. Besides a dozen other of our well known specialists and practitioners have read it critically and assisted us giving it the high degree of polish and perfection that it exhibits.

All agree that it will do wonders for osteopathy, both in general and special practice, to give this kind of writing wide acquaintance among the people.

You will see by the way this brochure has been written that it is equally useful to the osteopathic specialist or to the general practitioner. It is calculated to increase confidence in both and make practice for both. Read it and see how this is accomplished, if it should seem at all mysterious to you just how such a thing could be done.

Quite a lot of osteopaths who ordinarily don't use literature at all have arranged to send out a thousand or five hundred of this "specialism" brochure, so there must be unusual merit and opportunity in it.

Make a good order for this July installment of "Osteopathic Health's" educative service and you will never regret it—that is, if you distribute it and give it a chance to work for you. Literature will not accomplish much for you, to be sure, if you pile it up on a cupboard shelf. Why not see what a thousand will do for osteopathy in your field?

THE BUNTING PUBLICITY SERVICE
for OSTEOPATHS

Waukegan,

Illinois

[This Reader is Ready for you to Have Reprinted in Your Home Newspaper.]

The Osteopathic Specialist in Diseases of the Ear, Nose, Throat and Eye

The average person who talks about osteopathy does not seem to realize that this profession has its specialists and its surgeons, its hospitals and sanatoria, its schools and research institutes just like the "regular" medical profession. Perhaps some persons who want to try osteopathy for conditions that the other schools have failed to help may be deterred from doing so by fear that it has no specialists or institutions to fall back on when such aid is needed. If that is the case, such fears are groundless. The osteopathic general practitioner is backed up in his work by well trained and experienced osteopathic specialists and surgeons just the same as the general practitioner is in any other branch of the medical profession. He also has his hospitals and sanatoria to which he can direct his patients if they prefer to go to an institution which is wholly under osteopathic auspices. That these are fewer in number is due to the fact that this profession is so much younger.

This is explained fully in a readable article presented in the July issue of the magazine, "Osteopathic Health," entitled "The Osteopathic Specialist in Diseases of the Ear, Nose, Throat and Eye." This explanation is popularly written since it appears in a lay magazine. It shows that the specialists and surgeons maintained by the osteopathic profession have training and skill as good as the best.

It appears from a reading of this article that the osteopathic general practitioner and the osteopathic specialist work exceedingly well together. The general practitioner's services of tissue-normalization and tissue-adjustment, it seems, is all in harmony with the specialist's work. It even assists the osteopathic surgeon's later work, should operative interference become necessary, for after surgical shock nothing is said to be so good for the patient as the ministrations of the osteopathic general practitioner. So it appears that the family osteopath ordinarily begins and ends such work of repair and recuperation.

It is surprising, says this article, how many conditions of ear, nose, throat and eye have been found to yield to the work of either the general practitioner or specialist of this school. One finds explanations in this text about the following subjects: Tonsils and adenoids in children, sinus infections, hay fever, deafness, eye strain, strabismus and other eye diseases, headache and nervous debility. It is evident that the osteopathic specialists have worked out a new sort of technique and are getting results not achieved by the other schools.

If you want to read this article apply for a free copy of this July issue of "Osteopathic Health" to Dr. _____ of _____ or to the publishers, The Bunting Publications, Inc., Waukegan, Ill. A post card request will bring it.

Every Osteopath Should Read It

I have just read the proof sheets which you sent me of the special Eye, Ear, Nose and Throat issue of "Osteopathic Health" which you will produce in July. I think it is a wonderful brochure. I feel that every osteopath should receive a copy of this issue of "Osteopathic Health" and should read it carefully. There are some points in it that would do osteopathic practitioners good to ponder. Very important is that part in which the recommendation is made that certain cases should be referred to osteopathic specialists. It will help osteopathic practice generally to spread this message broadcast.—Dr. H. J. Marshall, Secretary of the Osteopathic Oto. Laryn. Ass'n., Des Moines, Iowa.

What Seaman Thinks of It

I wish to compliment you on your first issue of the "Specialist" brochure. It is exceptionally good. Put me down for 2,000 copies of "The Osteopathic Specialist in Diseases of the Ear, Nose, Throat and Eye."—K. L. Seaman, D.O., Ft. Wayne, Ind.

"OH" Issues and Standard Laity Brochures Now Available

"Mechanical Causes of Woman's Ills and How Osteopathic Adjustment Cures Them"—June issue "Osteopathic Health". Price, 100 copies, contract, \$6.50; single order \$7.50.
 "Why Diseases of Stomach and Digestive Organs Develop"—May issue "Osteopathic Health". Price, 100 copies, contract, \$6.50; single order, \$7.50.
 "An Osteopath's Explanation to a Health Seeker". Brochure No. 54, undated. Price, 100 copies \$6.00.
 "Questions Often Asked About Osteopathy and Their Answers". Brochure No. 53, undated. Price, 100 copies \$6.00.
 "How a Case of Sleeping Sickness Found a Cure". Brochure No. 34, undated, 200 copies only. Price, \$6.50 per hundred.
 "Osteopathy in the Inflammatory Diseases". By the late Professor Lane. Brochure No. 8, undated. Price, 100 copies \$6.00.
 "A General Sketch of Osteopathy". Brochure No. 51, undated. Price, 100 copies \$6.00.
 "Osteopathy Potent Where Serums and Vaccines Fail", by Michael A. Lane. Brochure No. 16, undated. Price, 100 copies \$6.00.
 "Osteopathy in Winter's Ills". Brochure No. 52, undated. Price, 100 copies \$6.00.
 "A. T. Still as a Medical Thinker", by Michael A. Lane. Brochure No. 18, undated, 400 copies only. Price, 100 copies \$6.50.
 "Most Diseases are of Spinal Origin". Brochure No. 36, undated. Price, 100 copies \$6.00.
 "Osteopathy as a Science", by John Comstock, D.O. Brochure No. 37, undated. Price, 100 copies \$6.00.
 "Osteopathy Cures Various Nervous and Blood Disorders". Brochure No. 50, undated. Price, 100 copies \$6.00.
 "Philosophy of Osteopathy". Illustrated. Brochure No. 48, undated, 500 copies only. Price, 100 copies \$6.50.
 "What is Osteopathy Good For?" Brochure No. 44, undated, 75 copies only. Price, \$2.00 per 25 copies.

THE BUNTING PUBLICITY SERVICE
 FOR OSTEOPATHS
 Waukegan, Illinois

"The Body's Four Grand Systems of Elimination" in August

We are glad to announce that our August installment of Osteopathic Health's service of public education will comprise this standard brochure by HSB which has not been available for some time. Few of our standard brochures have achieved any wider popularity with the profession. This one you may recall, presents the broad subject of disease from the point of view of the characteristic failures of elimination in one or more of the four emunctory channels. It makes disease, especially the infections, seem very graphic, too; and it forms a good peg on which to hang the essential osteopathic principles of diagnosis and therapy. Get your order in early so we can include it in our August edition just about to run.

Shush-h-h—Here's a Secret! That Automobile Number in September

Did you know that Dr. John A. Van Brakle had written an Automobile Number of *Osteopathic Health* to appear as the September installment? Well, he has. And it's beautiful—simply beautiful. You know, John was an M. E. before he became a D. O.—in fact a double-jointed M. E., which is to say, a "Mechanical Engineer" and a "Master of English" both. It was the mechanical principles of healing in osteopathy that caught John's fancy and lured him from the field of combustible engines into adjusting human engines. Well, John has been

observing and philosophizing and writing ever since, and this "Automobile Number" of *Osteopathic Health* for September is the fruit of it. Enough said. But be sure you will want it.

**To Our Patients:
 Osteopathy, Too. Has Its Specialists:
 "We Can Take Care of You Within Our Own Profession"**

That is the message of the July issue of "Osteopathic Health" and it will increase public confidence in your profession and in your own private practice to give this message wide distribution. Now on sale and ready for delivery. It is entitled "The Osteopathic Specialist in Diseases of the Ear, Nose, Throat and Eye." Can't you find good use for a thousand of them?"

THE BUNTING PUBLICITY SERVICE
 for OSTEOPATHS
 Waukegan, Illinois

Congressional Bills Now Satisfactory

The National Physical Education Bill, known as H.R. 22, introduced by Congressmen Fess and Capper, formerly known as the Fess-Capper Bill, has been amended in a manner satisfactory to the A.O.A. The new Towner-Sterling Bill S. 1252, H.R. 7, a substitute for the Smith-Towner Bill of last Congress has been altered in such a way as to have the objectionable features of this bill eliminated and there is no further reason, in the judgment of the Legislative Bureau, why the profession should object to this new Towner-Sterling Bill known as the Education Bill. Objections to both of these measures having been overcome we are advising or urging the profession to support the measures.—W. A. Gravett, D.O., Secy., Dayton, Ohio.

Dr. Lillian Whiting Hops the Western Circuit

Dr. Lillian M. Whiting, Los Angeles, Cal., professor of obstetrics at the College of Osteopathic Physicians and Surgeons, ex-president of the California Osteopathic Association, and a practicing obstetrician of wide renown, has just completed the big clinic circuit trip of the West—a wonderful feat for a woman. She began at Fresno, California, May 19th and ended at San Diego, June 10th. She spoke at all the western societies on osteopathic obstetrics and also at many women's and mothers' clubs and other audiences of lay women, on the health of the expectant mother. Dr. Whiting is the first woman to make the western circuit and this contribution of her valuable time and energy to the cause has done great service to the cause.

Brookville, Pa., Hospital Boycotts

The medical doctors of Brookville, Pennsylvania, have adopted a policy of boycott against osteopaths using the Brookville Hospital. This was aimed as a hardship on Dr. Doris J. Bowlby, our osteopathic representative in that place, formerly a resident of El Paso, Texas. Dr. Bowlby had four patients operated on in one day by an out of town surgeon whom she brought to that city to look after her cases. These operations took place at the patients' own homes, as hospital facilities had been denied them. The matter made a great rumpus in the town and the Brookville American gave a column to it on the front page, after interviewing the osteopath, the M.D.'s and the hospital authorities on the case. At the last report the M.D.'s were making their boycott stick, and it seems a pity that there are not some other champions there to help Dr. Bowlby vindicate osteopathy. Dr. Bowlby is entitled to much credit for her courageous fight.

For Sale at Sacrifice!

High Grade Practice (Now running \$9,000 per annum and growing each month) and Splendid Complete Equipment.

Owner retiring from practice. Possession September 1st. Town of 10,000 in center of best sugar, rice and cotton country of South. Ten small towns within a radius of 20 miles. No other D.O. Equipment includes 2 McManis De Luxe Tables; 1 De Luxe Stool; Complete Eye, Ear, Nose and Throat Specialist's Outfit; Sorenson Compressed Air Cabinet; McIntosh Battery; Violet Ray Outfit; Microscope; Instruments of all kinds; Library of 150 volumes. Also office furniture in upholstered ivory wickerware. Office occupies one entire floor especially arranged. Special practice room finished in white enamel. Living rooms in connection can be had if desired. Long lease at a reasonable rent. A wonderful opportunity for the right man to step into splendid practice and assured income. Price for practice, equipment, instruments and furniture, only \$2,720; part cash, balance secured notes. If you are qualified for a high grade general and specialty practice it will pay you to investigate this unusual opportunity.

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Thirty Days of Intensive, Practical Work.

Fee \$100. Certificate at completion of course.

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- DR. A. B. TAYLOR, *Orthopedics, Pediatrics and Asst. Surgeon*
- DR. G. C. TAYLOR, *Eye, Ear, Nose and Throat*
- DR. LOLA D. TAYLOR, *Consultant and Gynecologist*
- DR. JOHN P. SCHWARTZ, *Urology and Proctology*
- DR. C. R. BEAN, *Staff Physician*
- DR. JOS. L. SCHWARTZ, *Staff Physician*
- DR. F. J. TRENER, *Superintendent and Radiologist*
- DR. BYRON L. CASH, *Pathologist, Cystoscopist and Genito-Urinary Diseases.*
- DR. E. H. PHILLIPS, *Interne*
- DR. H. H. LEFFLER, *Clinical Diagnosis*
- DR. T. M. PATRICK, *Staff Physician*
- DR. H. B. WILLARD, *Staff Physician*

Postoffice Department Rescinds Boycott of Osteopathy

(Continued from page 8)

of the United States or some person licensed under the State laws to practice medicine and surgery, in which cases the certificate of a surgeon or physician prescribing such treatment must accompany the certificate of the osteopath, chiropractor, or mental healer.

WILL H. HAYS,
Postmaster General.

IN DO. LAND

C. C. O. Alumni Banquet

The Chicago College of Osteopathy Alumni Association held its annual banquet in honor of the class of 1921, at the Hotel Sherman, Saturday, June 18th, 7:30 P. M.—*L. C. Hanavan, D.O., President.*

Lion's Club

"Members of this National Den who expect to attend our National Osteopathic Convention, will immediately notify Dr. Leonard R. Rench, Suite 411, Seventy-First Euclid Bldg., Cleveland, of such intentions."—Very truly yours, *Leonard R. Rench.*

"HARVEST LEAFLETS"

to Reach the Multitude and Arouse
the Disinterested

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

4-Page Harvest Leaflets

- No. 1. What Doctor Shall I Employ?
2. Disease Caused by Mechanical Pressure.
3. How Osteopathic Patients are Treated.
4. Getting Well All Over at the Same Time.
5. Building Up Weak Throats.
6. A Chiropractor at Work.
(George Creel in Harper's Weekly).

Price \$10.00 per thousand,
with or without your professional card.

\$1.25 per hundred.

6-Page Harvest Leaflets

- No. 7. What is Osteopathy?
8. A Word to Former Patients.
9. What Osteopathic Fingers Will Do.
10. Neuritis From a Slipped Rib.
11. What is Chiropractic?
(As told in Gubernatorial Veto, Supreme Court Decision and A.M.A. Journal Editorial).
12. Where Chiropractors Are Made.
(A reprint from the A.M.A. Journal).
13. Chiropractic Kleptomania.
24. Neuralgia and Headaches.

Price \$12.50 per thousand,
with or without your professional card.

\$1.50 per hundred.

8-Page Harvest Leaflets

- No. 14. An Explanation of Osteopathy.
(As stated by the London Times).
15. Why the Spine is the Basis of Health.
16. What Osteopathy Does for Women.
17. Osteopathic Aid in Pregnancy and Confinement.
25. Osteopathy in Obstetrics

Price \$18.00 per thousand,
with or without your professional card.

\$2.00 per hundred.

1-Page Harvest Leaflets

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

Price \$5.00 per thousand,
with or without your professional card.

\$0.75 per hundred.

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

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

The BUNTING PUBLICATIONS, Inc. - Waukegan, Ill.

Mrs. Harry Semones Heads Parent-Teachers Association

Delegates of Parent-Teachers Association of Virginia assembled at Roanoke, April 2nd and organized a State Parent-Teachers Association. Mrs. Harry Semones, wife of Dr. Harry Semones, of Roanoke, was elected President. She had for some time past served as President of The Central Council of Roanoke, Salem, and Vinton.

Dr. Betzer Heads Dallas Association

The Dallas, Texas, Osteopathic Association held its regular monthly meeting and annual election of officers April 14th. Those elected were: President, Dr. H. L. Betzer; Vice-President, Dr. J. W. McPherson; Secretary-Treasurer, Dr. R. N. Blackwell. The program included papers by Dr. Phil. R. Russell and Dr. John Peterson, both of Ft. Worth.

Osteopath Kiwanis, Attention!

All osteopaths who belong to the Kiwanis Club and who expect to attend the convention in Cleveland in July are requested to please notify Dr. Jos. F. Byrne, 602 Osborn Bldg., Cleveland, Ohio, as soon as possible. We want to find out how many to expect so we can see what can be done in the way of entertainment at that time. The regular meeting day of the local club is Thursday at 12:00 o'clock.—*Joseph F. Byrne, D.O.*

"Camp Osteopathy" for New Jersey

Dr. Albert J. Molyneux and Dr. Cora Belle Molyneux of 2859 Boulevard, Jersey City, N. J., have recently purchased a summer home at Lake Hopatcong, N. J., consisting of a large plot on the lake front, a sever room and attic house with all improvements, dock, boat house and garage. It will be known as "CAMP OSTEOPATHY" and the doctors will maintain a branch office there during the season. The city offices will remain open as usual.

Dr. Waldo's Beautiful New Home

We just moved a month ago into our new home and really it's a beauty. We feel we are fixed for life now and naturally I am proud of it. There never was, and there isn't today, any reason why the osteopath shouldn't have as nice a home as any one, drive as nice a car, and everything. We are the ones that limited ourselves to two dollars. It wasn't the public. Naturally we are the ones to change it. The public won't change it for us unless we act ourselves.—*W. E. Waldo, D.O., Seattle, Washington.*

Sacramento Valley Convention

The Sacramento Valley Osteopathic Society convened May 20th in the office of Drs. Daniels and Buchman, Sacramento. Dr. Lillian Whiting of Los Angeles gave talks on obstetrics that were most instructive. Plans were made for immediate establishment of an osteopathic clinic in Sacramento. Officers for the year were elected as: Dr. J. Coleman Browne, Stockton, Pres.; Dr. C. E. Fenner, Sacramento, Vice-Pres.; Dr. Roy H. Buchman, Sacramento, Sec-Treas. Dr. Una W. Carr was the outgoing president.

Change in Date and Place of Texas State Board of Medical Examiners

Since it has been learned that the Legislature will not be convened in Special Session until July, the Texas State Board of Medical Examiners will hold its next meeting for the examination of applicants for Licenses to practice Medicine and Surgery in the state of Texas in the Hall of House of Representatives, Capitol Building, Austin, on June 21, 22, and 23, 1921, and not at the Medical College, Galveston, as was previously announced.—*T. J. Crowe, M.D., Secretary.*

New Jersey Meeting

The New Jersey Osteopathic Society held its June meeting at the Metropolitan Hotel, Asbury Park, June 11th. Program: Dinner at 6:00 P. M. followed by Dr. Arthur Flack's discourse on the "Fundamental Factors Upon Which the Practice of Osteopathy is Built." Business meeting during which the following subjects were discussed: Our Picture Policy, A. O. A. Policy, Our Hospital, Our Bill and the Legislative Plan, How do we raise the money? Sunday: Ocean bath for carterisers followed by a trip on Deal Lake. P. M. Luncheon.—*A. B. Firth, D.O., Chairman.*

Fifth Annual Rocky Mountain Osteopathic Conference

The Colorado Osteopathic Association is preparing to hold its Fifth Annual Rocky Mountain Osteopathic Conference at Colorado Springs, July 11th to 16th, 1921. The program comprising both profit and play is prepared and all osteopaths who are turning their eyes toward the hills are invited to attend. The program will be practical, and those who have attended the former meetings have been ready to come again. After attending the meeting, there are all manner of vacation possibilities in the mountains. Our slogan is "Cool off and turn up."—*Martha A. Morrison, Secretary.*

Taylor Clinic Announcement

Dr. John P. Schwartz has been assigned to the Department of Urology and Proctology. Dr. Schwartz has had splendid preliminary training, having served a year as Interne and a year as House Physician at The Mayo Clinic, and a year as House Physician at The Iowa Moines General Hospital. Dr. H. H. Leffler, recently

instructor in the A.S.O. and formerly associated with Surgeon-General E. R. Stitt in the Laboratories of the United States Naval Medical School and Hospital at Washington, D. C., has been added to the Department of Clinical Diagnosis and will have charge of Basal Metabolism, Blood Chemistry and Special Urine Chemistry.

**Central Pennsylvania Osteopathic Society
March Meeting**

The Central Pennsylvania Osteopathic Society held its monthly meeting at Harrisburg March 24th in the office of Dr. Geo. Krohn. The program consisted of papers by Dr. Samuel Grossman of Williamsport on "Feeble-mindedness," and Dr. Theo. Thompson, President of York Sanitarium on "Institutional Work." Dr. Emma Purnell returned from a visit to Dr. Josephine Pierce of Lima, Ohio, and reported on the Woman's National Association. Legislative matters both State and National were earnestly discussed. Clinics reported on with Williamsport in full swing.—*H. H. Walpole, D.O., President.*

**Dr. Francis A. Cave of Boston Suffers
Nervous Breakdown**

Dr. Francis A. Cave, of Boston, Mass., has been forced to retire temporarily from active practice owing to a severe nervous breakdown. Dr. Edith S. Cave, Dr. Majorie M. Johnson and Dr. Charles R. Wakeling have taken over the practice of Dr. Francis A. Cave and they will continue the care of all referred cases. Dr. Cave has been exceedingly active in work for promotion of osteopathic advancement and has been carrying a heavy burden for several years past. The profession will greatly regret his severe illness. It is to be hoped that his practice will be maintained and even expanded during his enforced retirement from active practice.

**Chicago Osteopathic Hospital Running to
Full Capacity**

The report of Superintendent of Hospital made at annual meeting of Chicago Osteopathic Corporation showed the hospital to be running to full capacity and that there is a waiting list all the time. Many improvements in equipment have been made during the past year and the work is going on better than ever before. Early this year Miss Anna Jones, superintendent, registered to take up other work and the Hospital was fortunate in getting Mrs. Laura Pierson Pennington, formerly for eight years, superintendent Knoxville (Tenn.) General Hospital, Under her supervision the work is steadily improving.

**Chicago Osteopathic College Turning
Students Away**

The Dean's report at annual meeting of Chicago College of Osteopathy, showed that the college was running at limit of its capacity; the class of work given was of a very high standard and constantly improving; the quality of the students was of the highest type; and that it had come to the point where one of two plans must be adopted; namely, (a) limit student body to its present number and be very much more selective in the quality of the students kept, dismissing those not doing best kind of work, thus making room for those anxiously awaiting opportunity to get into the college, or (b) increase capacity by building additional laboratory and class room space.

Southeast Missouri Osteopaths Organize

Osteopaths from all over Southeast Missouri met at Sikeston Wednesday May 25th, for the purpose of forming organization and elected the following officers: President, Dr. C. W. Kinsey of Cape Girardeau; secretary-treasurer, Dr. Anita Bohnsack, Cape Girardeau. Addresses were made by Drs. C. E. Crosby of Festus; G. A. Bradfate, Caruthersville; George McElwee, Kennett; Cannon, Dexter, Hunter and H. E. Reauber of Sikeston. Plans were made to engage lecturers from two colleges of osteopathy for the next meeting, which will be held October 1st in Cape Girardeau. Free clinics will also be held. Following the meeting a banquet was held at the Marshall Hotel, after which members indulged in school reminiscences.

Southwestern Osteopathic Sanitarium

Our work during the past year has been progressing very satisfactorily. Every year since the founding of the institution (nine years ago) has shown a good and substantial growth and cases have been received from eleven different states of the Union and have included practically all kinds of hospital cases except communicable diseases. The Training School will have graduating exercises, June 16, 1921, at which time five nurses will be graduated: Mrs. Golda Winters, Miss Grace Boren, Miss Clara Powell, Miss Glean Clymer, and Miss Elsie Epps. Our training school is accredited by the State Nursing Board and all of our graduates have passed the examinations at their first attempt and with exceptional high grades. We are badly in need of more properly qualified student nurses.—*H. C. Wallace, D.O., Blackwell, Okla.*

**Semi-annual Meeting of the Virginia
Osteopathic Society**

The semi-annual meeting of the Virginia Osteopathic Society was held at Murphy's Hotel, Richmond, April 22, 1921. Dr. W. Banks Meacham gave a talk on "Osteopathic Institutions", and Dr. A. R. Tucker told the society about the possibilities of the new osteopathic sanitarium in Richmond. The Virginia Society invited the American Osteopathic Association to meet in Richmond in 1928, which date is the 100th anniversary of

the birth of Dr. Andrew Taylor Still, the founder of osteopathy, whose birthplace is in Lee County, Virginia. Dr. S. H. Bright was elected as the delegate to represent Virginia at the National Convention to be held in Cleveland in June. Dr. Semones was named as the alternate.—*R. A. Bagley, D.O., Secretary.*

**Osteopaths Seek Law for Practice in
District of Columbia**

A bill regulating the practice of osteopathy in the District of Columbia was the subject of a hearing before the House District Committee at Washington, Wednesday, May 25th. This bill provides that osteopaths not having diplomas from one of the recognized osteopathic colleges should be barred from practice unless they pass an examination before a board of examiners to be established for that purpose. After considerable discussion a subcommittee of three was appointed who in conference with representatives of the osteopathic association of the District were to consider the bill and amendments. During the same hearing local chiropractors with conflicting proposals for legislation on chiropractic were told to report to the committee, after composing their differences, and submit proposals for legislation on which the chiropractic associations were agreed.

**Abscessed Teeth Caused Death of
Dr. Norman L. Sage**

Norman L. Sage, M.D., D.O., of Janesville, Wisconsin, died May 25th as result of an infection following extraction of abscessed teeth. Dr. Sage was ill only one week and his sudden death came as a profound shock to his extensive clientele by whom he was held in the highest esteem because of his sterling qualities and unusual skill as a physician. He was 61 years of age and is survived by his widow. Dr. Sage was always most loyal to osteopathy and was a great fighter for its rights and for its advancement. At one time he was located in Canada and was very active in his efforts to secure adequate legal recognition and rights for osteopathy in the Dominion. Dr. Sage enjoyed a heavy practice and his sudden death creates a vacancy which should be quickly filled by some well qualified aggressive osteopath. Anyone interested should address Mrs. Clare E. Sage, 222 Hayes Block, Janesville, Wisconsin.

"Student Recruiting Campaign"

The Illinois Osteopathic Association has put on foot a Student Recruiting Campaign, the object of which is to get students for our osteopathic colleges. A letter was sent to every osteopathic physician in Illinois requesting that each submit ten names or more of young men to whom the AOA could send literature. Names and addresses with remittance of three cents for each name, covering about one-third of the expenses, are to be sent to the chairman in the various districts, as follows: District No. 1 Dr. John Ralston, Glenoe, Ill. District No. 2 Dr. David H. Hardie, Galena, Ill. District No. 3 Dr. C. E. Medaris, Rockford, Ill. District No. 4 Dr. Wm. A. Atkins, Clinton, Ill. District No. 5 Dr. C. J. Cunningham, Villa Grove, Ill. District No. 6 Dr. Arthur Roberts, Taylorville, Ill. District No. 7 Dr. S. Borton, Golden, Ill. District No. 8 Dr. H. M. Grise, Olney, Ill. Without doubt this is a very praiseworthy undertaking and we are sure that the osteopaths of Illinois will give it their generous support.

Central Penn. Osteopathic Society April Meeting

The Central Pennsylvania Osteopathic Society held its April meeting in Harrisburg at the office of Dr. G. W. Krohn, Dr. H. H. Walpole of Lancaster, presided. Members from York, Williamsport, Lewistown, Harrisburg and Lancaster were present in full force. The program included a talk from Dr. Ruth Deeter of Rose Valley Sanitarium, Media, Pa., on "Sanitaria Environment." Dr. Deeter is an interesting and convincing speaker. Dr. Ira Drew of Philadelphia lectured on "The Endocrines in relation to underdeveloped children." Dr. Drew is an inspiration. He brings his hearers the results of years of close observation and imparts his knowledge in easy terms. Clinic reports were encouraging. Williamsport in full operation. Lancaster to open May 1st. York making great preparations. The legislative program was given much consideration. Dr. Vastine of Harrisburg, whose dynamic energy in such matters cannot be measured, gave gratifying assurance that the various efforts of the State Medical Board to curtail the osteopathic rights were being undermined. Nothing escapes Dr. Vastine's vigilance. The Central is a live bunch and with such energizers as Deeter, Drew and Harry Vastine it makes for good "Homebrew".—*Bertha Maxwell, D.O., Secretary.*

O. S. C. New York News

The Osteopathic Society of the City of New York, held its last monthly meeting of the year Saturday evening in the new ball room, of Hotel Plaza, Saturday evening, May 21, 1921. Program: Cranio-Cerebral Topography with Osteopathic Relations. Dr. F. Clyde Humbert, Syracuse, N. Y. X-ray Findings as an Indication or Contro-Indication for Osteopathic Manipulations. Dr. Lewis Gregory Cole, New York City. Progress of Vigilance Committee, Walter J. Trudden, Esq., Brooklyn, N. Y., Vigilance Com. Atty. The following nominees for ensuing year were voted upon at this meeting: President, Dr. Cecil Rufus Rogers; Vice-President, Dr. Kate Louise Norris; Secretary, Dr. William D. Fitzwater; Treasurer, Dr. George H. Merkle; Directors, Dr. H. Van Arsdale Hillman, Dr. L. Mason Beeman, Dr. John Benjamin Buehler, Keeper of Records, Dr. Cora Belle Weed, Sergeant-at-Arms, Dr. C. J. W. Beal. At the meeting at the Hotel Pennsylvania, April 29th

and 30th, which was held under the auspices of this Society, a new Society to be known as The Eastern Osteopathic Association was formed, and the following officers were elected for the year: President, Dr. H. V. Hillman, New York City; 1st Vice-President, Dr. J. S. Logue, Atlantic City, N. J.; 2nd Vice-president, Dr. Arthur Paterson, Wilmington, Del.; 3rd Vice-president, Dr. Charles M. Sigler, Trenton, N. J. Secretary, Dr. F. J. Smith, Philadelphia, Pa. Treasurer, Dr. Harrison J. McManis, Baltimore, Md. The Eastern Osteopathic Association voted in favor of the O. S. C. N. Y. inviting the A. O. A. to New York City in 1922. It is the intention of the committee appointed to arrange plans for extending this invitation in an attempt to secure the solid backing of the entire East.

Florida State Osteopathic Association Convention

The annual meeting of the Florida State Osteopathic Association was held at the Hotel Hillsboro in Tampa, April 29th to 30th. It was a very enthusiastic meeting and great credit was due the local osteopaths for their interest and enthusiasm in getting up such a meeting. Dr. Percy Woodall of Birmingham, Ala., gave a very interesting and instructive lecture on the evening of the 29th to a large and enthusiastic audience, among whom were a large number of Rotarians, due to Dr. Berry's influence as a member of the local Rotary Club. The following day was devoted to the reading and discussion of a number of very instructive papers, among which was one on Blood Pressure by Dr. Shumacher of Eustis, one on Diet by Dr. Glassecock of St. Petersburg, a very interesting and instructive one on Technique by Dr. Woodall, following which he gave a brief explanation of the Society for the Advancement of Osteopathy. At the end of his talk a resolution was passed unanimously endorsing the Society for the Advancement of Osteopathy, and a number of the osteopaths signed cards to support the Association financially. In the afternoon there were a number of interesting papers and discussions, followed by a Spanish dinner at the Plaza Restaurant in the evening. Dr. Robinson of New Smyrna was elected president, Dr. Ida Ellis Bush of Jacksonville, Vice-president and Dr. Grace Miller was elected secretary. A legislative committee consisting of Drs. Addison O'Neill of Daytona, Ida Ellis Bush of Jacksonville and J. C. Howell of Orlando, was appointed to change the law regarding reciprocity, to change the standard to a four year's high school course and make a few other minor corrections regarding the law. The next meeting will be held at New Smyrna, Florida, the last of October.—*J. C. Howell, D.O.*

**Twenty Second Annual Convention of the
Pennsylvania Osteopathic Association**

The Pennsylvania Osteopathic Association held its 22nd annual Convention at the Penn-Harris Hotel, Harrisburg, May 27, 28. Program: Friday Morning, 9:00 Call to Order. Address of Welcome, George A. Hoverter, Mayor of Harrisburg. Response, Dr. C. J. Muttart. Communications. Minutes. Appointment of Committees. President's Address, Dr. H. M. Goehring. 10:00 "Feeble-mindedness" Dr. S. L. Grossman. 10:30 "Some Wild X-Ray Findings I have Known", Dr. Dudley B. Turner. 11:00 "Selling Osteopathy", Dr. J. Harry Slough. 11:30 "Painless and Bloodless Tonsilotomy", Dr. C. C. Tallafiero. Friday Afternoon. 1:30 Call to Order. "Selling Osteopathy" Dr. John B. Buchler. 2:00 Treatment of Goitres, Dr. Asa G. Walmsley. 2:30 "Osteopathic Treatment of Neurological Conditions", Dr. A. M. Flack. 3:00 "Osteopathic Technique", Dr. Oliver J. Sartwell. 4:00 "Osteopathic Technique", Dr. H. Carlisle. Friday Evening. 7:00 Banquet and Dance. Saturday Morning. 9:00 "Call to Order". "Bull or Bear Osteopathy", Dr. Geo. W. Good. 9:30 "Demonstration of Hubbell Sigmoid Dilator", Dr. Chas. J. Muttart. 10:00 Subject to be announced, Dr. H. V. Carter. 10:30 "Osteopathic Technique", Dr. Oliver J. Sartwell. 11:00 "Vertebral Plexus and Its Osteopathic Significance", Dr. O. J. Snyder. 11:30 "A Mighty Interesting Case", Dr. E. M. Downing. Recess. Saturday Afternoon. 1:30 Business Session and General Discussion. Exhibitors. Horlick's Malted Milk Co. Kress Owen Co., Glycothymoline. Phillips Co., Milk of Magnesia and Digestible Cocoa. Mellin's Food. Pepsodent. Colgate & Co. The Denver Chemical Co. (Antiphlogistine). The Superior Specialty Company.

**Wisconsin State Osteopathic Ass'n. 23rd
Annual Convention**

The 23rd annual meeting of the Wisconsin State Osteopathic Association was held at Milwaukee, Friday and Saturday, May 27-28, New Plankenton Hotel. Friday, May 27, 10 a. m. Conferences of all officers and committees. 1:30 p. m. Individuality in Technique, Dr. A. W. Brockway. 2 p. m. Ankylosis as a Sequel to Arthritis, Dr. Geo. McIntyre. 2:30 p. m. Sleeping Sickness, are we Prepared? Dr. C. W. Parish. 3:00 P. M. Theories about Osteopathy and Gynecology, Dr. Clara Busse. 3:30 P. M. Reports of Standing Committees: 1. Department of Internal Affairs, Dr. H. R. Bell, Chairman. 2. Department of Publicity and Education, Dr. C. C. Hitchcock. 3. Department of Public Health and Clinics, Dr. G. M. McIntyre. 4:00 P. M. Business Session: 1. Appointment of Convention Committees (a) Resolution and Necrology, (b) Auditing and Credentials, (c) Special, if any. 2. Report of Official Committees: (a) Legislative, (b) Legal Defense, (c) Hospital, (d) State Board of Medical Examiners. 6:30 P. M. Informal Annual Dinner. Saturday, May 28, 9:00 A. M. Executive Session and Election. 1. Reports of Officers, 2. Election of New Members, 3. Report of Committee on Credentials, 4. Election: (a) President, (b) Vice-President, (c) Secretary, (d) Treasurer, (e) Member Examiners Board succeed-

ing Dr. McIntyre, (f) Member Legislative Committee succeeding Dr. Bond, (g) Delegates and Alternates to House of Delegates, 10:00 A. M. Theory of Lesions, Primary and Secondary, 11:00 A. M. Shop Talks on Osteopathic Affairs: 1 Our Attitude Toward Each other, 2 What we Owe Our Patients and Friends, 3 What Our Patients Owe Us, 4 Refinement in Office and Public, Are We Careless? 5. Fees and How They Should be Governed, 12:00 Noon Recess, Saturday, May 28, 1:30 P. M. Demonstration of Correction of Lesions as Suggested in Previous Discussion, Dr. Chester H. Morris, Chicago, 2:30 P. M. Reconstruction Work of the Disabled Service Men, as Carried on by the U. S. Public Health Service, Dr. Clifford C. Oliver, Passed Assistant Surgeon, USPHS Hospital No. 37 Waukesha, Wisconsin, 3:30 P. M. Final Business: 1 Report of Auditing Committee, 2 Report of Resolution and Necrology Committee, 3 Report of Special Committee if any, 4 Choose next Meeting Place, 5 Installation of Officers, 6 Unfinished Business, 7 New Business, 8 Adjournment sine die. Present Officers and Committees. President, Dr. Eliza M. Culbertson, Appleton; Vice-President, Dr. J. J. McCormick, Sheboygan; Secretary, Dr. E. J. Elton, Milwaukee; Treasurer, Dr. L. H. Noordhoff, Oshkosh. Standing Committees. Executive Board, (elective) Dr. Geo. M. McIntyre, Kenosha, (1921). Chairman of Department Public Health and Clinics, Dr. C. C. Hitchcock, Milwaukee, (1922), Chairman of Department Publicity and Education, Dr. H. R. Bell, Marinette, (1923). Department Internal Affairs, Legislative Committee, Dr. E. C. Bond, Milwaukee, (1921); Dr. A. W. Brockway, Waukesha, (1922); Dr. E. M. Olds, Milwaukee, (1923); Dr. J. J. McCormack, Sheboygan, (1924); Dr. A. V. Mattern, Green Bay, (1925). Special Legal Defense, Dr. F. N. Oum, Oshkosh; Dr. F. R. Thornton, LaCrosse; Dr. J. J. McCormack, Sheboygan. Official Paper, Wisconsin page edited by the Secretary, Central States Osteopath.

PERSONAL

Drs. Chester D. Losee and Mary Hille Losee announce the removal of their offices from 201 Main St., to 225 State Street, Hackensack, N. J.

Doctor J. K. Schuster, formerly of Stephenson Building, has announced his removal to 538 First Wisconsin National Bank Building, Milwaukee, Wis.

Dr. Benoni Bullock of Detroit, Michigan, has been in Escanaba, Michigan, doing specialty work in official surgery for patients of Dr. F. E. Dayton.

Dr. Frederick A. Webster of New York City has announced the removal of his offices to Knickerbocker Building, 152 West 42nd Street, corner of Broadway.

Dr. Morris Lychenheim of Chicago appeared on the program for a five minute talk at the Annual Dinner of the Human Welfare League of Chicago, held May 27th.

Dr. Catherine Compton of Beeville, Texas, will be on vacation during the months of June, July and August. In her absence Dr. A. Thaison Oller will have charge of the practice.

Dr. George M. Glasco of Warren, Ohio, is giving a series of Health Talks before the Industrial Club of the Y. M. C. A. of his town. The local newspapers have given good attention and have published his lecture in full.

Dr. Sara Kanzmeier has returned from the Chicago hospital where she underwent the radium treatment for fibroid tumors and is hopeful that the treatment will prove successful. Dr. Kanzmeier's address is Los Angeles, California.

Dr. Benoni A. Bullock has announced the opening of permanent offices at 405 Stevens Building, Detroit, Michigan. His practice will be limited to Abdominal and Official Surgery and Diseases of Women and Rectal and Prostatic complaints.

Dr. W. C. Dawes, Bozeman, Montana, was re-appointed by Governor Dixon to the State Board of Osteopathic Examiners. Appointment is for four years. Dr. Dawes has served twelve years on the Board, having received his first appointment in 1909.

Dr. A. Pearl Watson since her marriage has retired to private life—her address now being Mrs. John W. Bolton, P. O. Box No. 325, Lawrence, Mass. Dr. Laura J. Deason now owns and carries on the business formerly conducted by Dr. A. Pearl Watson at room No. 329, Bay State Building, Lawrence, Mass.

Dr. Paul Sinclair who has been doing specialty practice in Colorado Springs has returned to general practice at Lincoln, Nebraska. He found the altitude in Colorado altogether too high for him. He lost 35 pounds in weight in one winter and his nervous system became completely disorganized. On top of it all the day before he had decided to leave Lincoln he took the "flu." Although he was warned against the trip he decided to risk it as he was going overland in a closed motor car—a Dodge. He traveled by way of Cheyenne, a distance of 647 miles in 19 hours. The "flu" didn't get him down and his fever broke the fourth day and after a good sweat bath and some osteopathic treatment he began to feel pretty good and already in Lincoln he is getting back his good health and strength although yet a little weak.

MARRIED

Dr. Wm. A. Craig of Crafton, Pittsburg, Pa., to Miss Evelyn Valen, Story City, Iowa, Saturday, May 28th. Dr. Joseph Swart and Dr. Lillian B. Lauer on Thursday, May the twenty-sixth, at their residence in Kansas City, Kansas.

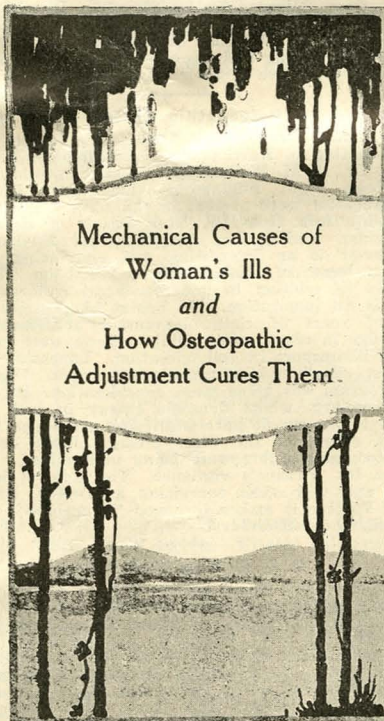
Osteopathic Health for July

THE OSTEOPATHIC SPECIALIST

DISEASES
OF THE
EYE, EAR,
NOSE AND
THROAT

This brochure gives its readers a new and enlarged conception of the position of osteopathy in the therapeutic world. It shows that the range of service obtainable through osteopathic offices is much greater than most people suppose. It creates greater confidence in osteopathic practice, and deeper respect for the osteopathic profession. Every patient should be presented with a copy. How many will you require?

Osteopathic Health — for June



This is just a "lovely" brochure in text and appearance, both. It carries a message of new hope to suffering women, too, that will be truly appreciated. It will be the means of earning the gratitude of many a woman who, through it, learns for the first time of osteopathic availability in her case. Ready now for shipment. Order today for a quick delivery!

Dr. La Rue Miller of Evanston, to Miss Charlotte Roberta Stolpman of Chicago, Wednesday, June 8th. They will reside in Evanston.

Dr. Ellen H. Brooks and Mr. J. F. Shultz, at Guthrie, Oklahoma, April 16th. Dr. Shultz will be associated in practice with Dr. C. L. Leeper, at 105½ W. Oklahoma Ave., Guthrie, Oklahoma.

BORN

To Dr. and Mrs. Charles R. Wakeling, Boston, Mass., a son, Robert Willard, on May 12th.

To Dr. and Mrs. F. B. F. Hardison of Charleston, South Carolina, a son, Henry Cheves Hardison, on May 22nd, 1921.

To Dr. Stewart J. Fitch and Dr. Marie B. Grunwald-Fitch of Pasadena, California, a daughter, Barbara Marie, May 7th, weight 9¼ pounds.

DIED

Dr. Norman L. Sage, Janesville, Wisconsin, May 25th as result of infection from abscessed teeth, age 61.

Henry Cheves Hardison, son of Dr. and Mrs. F. B. F. Hardison of Charlestown, South Carolina, May 22nd, aged four hours.

Dr. Maude Russell at Fort Worth, Texas.
Mrs. Ellen H. Wesson, mother of Dr. Mabel Wesson of Omaha, Nebraska, May 8th, age 80.

EXCHANGE and MARKET

WANTED—Bartlett Treatment Table. Address No. 297, care The OP, Waukegan, Ill.

WANTED—Four-year graduate and post-graduate of the A. S. O. wants northern practice for one or two months. Address No. 296, care The OP, Waukegan, Ill.

FOR SALE—Treating Table, \$5.00; Eight Volume Reference Hand Book, \$20; some office furniture cheap. Address No. 298, care The OP, Waukegan, Ill.

WANTED—Position as assistant by blind male osteopath. Graduated in 1919. Has a Pennsylvania and New York License. Made second highest mark in Pennsylvania examination and regarded as a good technician. Has had previous experience in private practice and obtained good results for patients. Would like to make but would prefer city practice. Address 295, care The OP, Waukegan, Ill.

FOR SALE—As a result of death, practice, good will and office equipment in one of the best towns in Wisconsin; practice income average between \$750. to \$1,000 per month. A splendid opportunity for a man of first class educational equipment and ability as an osteopathic physician. Address No. 291, care The OP, Waukegan, Illinois.

WANTED—To buy a D. O. practice in Chicago or suburb. Must give good references, good location and good fixtures. State your reasons for wanting to sell. I am a graduate of the D. M. S. C. of O. Phone Englewood 2797. Address No. 290, care The OP, Waukegan, Illinois.

WANTED—Man with Texas License for August and September and to remain as my assistant provided we can reach an agreement. Address No. 289, care The OP, Waukegan, Ill.

FOR SALE—My practice and office furniture in town of 2,500, wealthy community. I am the only D. O. in county, practice established seven years. Last year's business \$6,000.00 in eleven months. Low office rent. I do refraction also. Good business from nearby town which is only four miles distant. No better opportunity for making money. Going to take up special work. Quick action necessary. \$600.00 cash. Kansas gives reciprocity. Address No. 294, care The OP, Waukegan, Ill.

WANTED—Competent, graduate, male osteopathy one year; take charge practice established nine years; only Osteopath County Seat, Middle West; liberal percentage. Address No. 288, care The OP, Waukegan, Ill.

WANTED—A lady to take my practice in Chicago during month of July, either a Senior Student or a graduate. Terms, location, etc., on inquiry. Address No. 293, care The OP, Waukegan, Ill.

FOR SALE—One Root treatment table with swing attachment. In first class condition. Just recently recovered. Price \$20.00 f. o. b. Address P. care The OP, Waukegan, Ill.

FOR SALE—At sacrifice, high grade practice (now running \$9,000 per annum and growing each month) and splendid complete equipment. Owner retiring from practice. Possession September 1st. Town of 10,000 in center of best sugar, rice and cotton country of South. Ten small towns within a radius of 20 miles. No other D. O. Equipment includes 2 McManis De Luxe Tables; 1 De Luxe Stool; Complete Eye, Ear, Nose and Throat Specialist's Outfit; Sorenson Compressed Air Cabinet; McIntosh Battery; Violet Ray Outfit; Microscope; Instruments of all kinds; Library of 150 volumes. Also office furniture in upholstered ivory wickerware. Office occupies one entire floor especially arranged. Special practice room finished in white enamel. Living rooms in connection can be had if desired. Long lease at a reasonable rent. A wonderful opportunity for the right man to step into splendid practice and assured income. Price for practice, equipment, instruments and furniture, only \$2,720; part cash, balance secured notes. If you are qualified for a high grade general and specialty practice it will pay you to investigate this unusual opportunity. Address No. 292, care The OP, Waukegan, Ill.