

# **Osteopathic Truth**

**May 1920**

**Vol. 4, No. 10**

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# Osteopathic Truth

A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

Pledged to the TRUTH which Father Andrew saw,  
No favor sways us, and no fear shall awe.

Volume IV

MAY, 1920

Number 10

## We Have \$7,500 Toward Massachusetts College Fund

\$5,700 Raised at New England Convention—New York Association Gives \$500.

### GETTING HOT UNDER THE COLLAR

#### Do We or Do We Not?

One of our subscribers tells us that we make him hot under the collar every time he reads the magazine. He states that our viewpoint of Osteopathy is narrow.

Do we make you hot under the collar?

We want to. We want to awaken you to the great potential possibilities of Osteopathy that are being pushed aside every day in the false chasing of strange gods. We would like to get you mad enough to fight for Osteopathy as Dr. Still did. Dr. Still gave his all-in-all for Osteopathy. Will you?

We want to get you warm under the collar against those members of our own profession who think only of themselves. They are so selfish that the true interests of Osteopathy are naught to those who wish to mix drugs and still call it Osteopathy. Dr. Still said not; so do we.

We want to get you so warm under the collar that it will be impossible to get anything but a real adjustive treatment from anyone who calls himself an osteopathic physician. It is the public opinion of the profession that guides our own schools. Schools do not belong to the profession until their charter and property is vested in the trustees of the A. O. A.

We have a plan. The charter for the Massachusetts College of Osteopathy is owned by an M. D., but who has stated to some of the D. O.'s in Boston that he will dispose of it to us for \$20,000. Let us buy it and pre-

sent it to the Department of Education of the A. O. A. to be truly owned and run by the profession. I, Earl J. Drinkall, will hereby start the ball rolling by giving \$100 toward a fund to purchase this charter. Only 199 more needed. Who will be next? Hurry!

We want to get you warm under the collar against the many injustices done against Osteopathy, some of them brought on by ourselves inadvertently, others not. If laws are not going to protect us from the aggression by the hangnail, why then should we adhere to law, either? Why should we follow what some one else dictates to us? We are surely big enough and know enough to direct our own footsteps. We do not need an M. D. to tell us what we should do.

If we have made you warm under the collar to give and do for Osteopathy as Dr. Still did, then we have accomplished one of our purposes.

November, 1919, Truth.

We the undersigned members of the Osteopathic profession, promise to pay to the Dean of the M. C. O. the amount set opposite our names, on or before January 1, 1920, said amounts to be used only in the purchase of the said Massachusetts College of Osteopathy, and only on condition that it then be placed under the exclusive management of the Educational Department of the American Osteopathic Association.

Earl J. Drinkall.....\$100  
George W. Goode..... 100  
J. Oliver Sartwell..... 100  
W. Arthur Smith..... 100  
Helen G. Sheehan..... 100

Geo. W. Reid..... 100  
C. O. Fogg..... 100  
R. K. Smith..... 100  
H. H. Pentz..... 100  
W. W. Fessenden..... 100  
Elizabeth F. Kelley..... 100  
Charles Grapek..... 100  
Peter J. Wright..... 100  
C. L. Watson..... 100  
M. B. Barstow..... 100  
Charlotte Richmond..... 100  
Laura Meader..... 10  
Ralph A. Manning..... 100  
C. A. Lindquist..... 25  
M. L. Hartwell..... 2  
F. E. Moore..... 2  
Edgar S. Comstock, Secretary  
Chicago College..... 10

#### Raised at N. E. O. A. Convention

Harry J. Olmstead.....\$100  
Mark Shrum..... 100  
Francis A. Cave..... 100  
A. H. Paul, Bridgeport, Conn.... 50  
R. K. Smith (total \$200)..... 100  
C. W. Bruninghaus..... 100  
Earl Scamman..... 100  
Frances Graves..... 100  
Anna L. Hicks..... 100  
Lizzie Osgood..... 100  
Anna Slack, 146 Westminster,  
Providence, R. I..... 100  
Agnes Fraser..... 100  
George Bridges, 146 Westminster,  
Providence, R. I..... 100  
H. F. Collier..... 100  
W. B. Meacham..... 25  
L. Plaisted, Leominster, Mass.... 50  
M. K. Cole..... 50  
Allan A. Fehr..... 100  
E. W. Carter..... 100  
Maude Williams..... 100  
C. D. Thore..... 100  
M. T. Mayes..... 100  
W. C. Bryant..... 100

D. W. Coburn.....	100
C. G. Hatch.....	100
B. F. Riley.....	100
Helen King .....	20
E. L. Meader.....	20
L. M. Dibble.....	25
F. C. Heney.....	20
W. M. Kingman.....	20
W. Lindquist .....	20
Dr. Lancaster .....	20
Dr. Greenwood .....	20
New England Osteopathic Assn....	150
A. B. Ames.....	25
S. L. Gants, Prov., R. I.....	10
T. A. Darling.....	10
M. B. Johnson.....	10
J. M. Winslow.....	10
H. B. Rowe.....	10
C. D. Mott.....	10
A. E. Were, Albany, N. Y.....	100
C. Downing .....	10
D. Wing .....	10
Senior Class M. C. O.....	100
Freshman Class .....	100
Sophomore Class .....	50
Junior Class .....	25
O. Gossett .....	25
Burnsinsky .....	10
Granville Shibles .....	10
M. Pease .....	15
P. Everett .....	10
T. O. Monteith.....	10
M. Demerais .....	100
A. J. Boucher.....	50
I. T. S.....	50
K. P. D.....	50
P. S. G.....	50
K. P. D. Field Members.....	100
E. Heath Clark.....	25
A. Tinkham, Paid.....	100
R. Humphries, Paid.....	25
Bozo Club M. C. O.....	10
W. B. Meacham, Paid, gift from friend .....	5
S. C. McLaughlin.....	100
H. L. Pease, Putnam, Conn.....	25
G. F. Muntz.....	100
F. C. Nelson.....	50
The Loyal Twelve.....	500
C. W. Wood.....	10
M. P. Reid, Newton, Mass.....	20
Mrs. E. T. Walker.....	10
Mrs. A. Luther.....	10
New York Osteopathic Assn.....	500
C. W. Estey, Westfield, Mass.....	20
G. W. Estey, Attleboro, Mass.....	
The Emseco .....	25
Dr. E. C. Elderkin, Paid.....	5
A. P. Watson, Lawrence.....	50
Dr. Lottie D. Faul.....	5

**By Mail**

M. W. Brunner.....\$ 10

**STATE OSTEOPATHS ASSEMBLE  
HERE FOR MEETING, BANQUET****Prominent Physicians to Make Ad-  
dresses at Nineteenth Annual  
Gathering****WILL ELECT OFFICERS**

Prominent osteopaths from various parts of the country will be present here today on the occasion of the nineteenth annual meeting and banquet of the New Jersey Osteopathic Society, which will be held at the Trenton House.

Dr. H. W. Conklin, of Battle Creek, Mich., president of the American Osteopathic Association, one of the foremost figures in the profession, will be in attendance, while Dr. John H. Bailey, of Philadelphia, who enjoys a national reputation as a specialist of the ear, nose and throat, and who is known to many Trentonians as the founder of the famous Hay Fever Clinic at the Philadelphia Osteopathic Hospital, will also be among the guests.

Dr. J. Ivin Dufur, well known as a specialist of nervous and mental diseases, and president of the Dufur Osteopathic Hospital, Spring Garden Street, Philadelphia, will be one of the main speakers. Dr. Charles M. Sigler, of this city, is the president of the New Jersey Osteopathic Society.

The local committee, which has planned the meeting and completed arrangements for the entertainment of the visitors, is composed of Dr. Charles M. Sigler, Dr. Vane B. Sigler, Dr. J. H. Murray, Dr. W. J. Novinger and Dr. R. H. Conover. All of the Trenton men are graduates of the American School of Osteopathy, located at Kirksville, Mo. This institution, the fountain head of osteopathy, was founded in 1892 by Dr. Andrew Taylor Still.

**Program of Meeting**

The program will open this afternoon at 3 o'clock with an address on "Diabetes," by Dr. H. W. Conklin, of Battle Creek, Mich., and at 4 o'clock clinical pictures of 263 cases of hay fever will be shown by Dr. John H. Bailey, of Philadelphia. There will be a meeting of the executive committee at 5 o'clock, and at 5:30 o'clock there will be a meeting of the executive and legislative committees. Dinner will be served at 6 o'clock and at the close of the repast, there will be a business session and election of officers at 7:30 o'clock. Dr. Conklin will speak on

"Epilepsy" at 8:15 o'clock and at 9 o'clock Dr. Dufur will have for his subject, "Osteopathic Hospital Treatment of Nervous and Mental Conditions."

At the close of the session there will be remarks by the guests. The meeting will bring together all of the prominent osteopathic physicians in the state, and the get-together and banquet promises to be interesting, instructive and entertaining for all those present.

The present officers of the association follow: President, Charles M. Sigler, Trenton; vice president, Arthur L. Hughes, Bloomfield; secretary, Raymond S. Ward, Montclair; treasurer, Clinton O. Fogg, Lakewood.

The executive committee comprises: Robert M. Colborn, Newark; A. P. Firth, Newark; J. W. Jackson, Paterson; F. E. Keefer, Summit; A. Molyneux, Jersey City.

The local committee in charge of the meeting has made elaborate plans for the entertainment of the visitors. Many of the physicians served with distinction during the world war and this will be the first reunion for many of them since they received their honorable discharge from the service.

—Front Page, State Gazette, Saturday, May 1, Trenton, N. J.

**SAYS PROHIBITION HELPS HAY  
FEVER****Osteopaths Told That Sufferers, Un-  
able to "Drown" Symptoms, Seek  
Treatment**

"Prohibition was instrumental in curing thousands of hay fever sufferers," declared Dr. John H. Bailey, of Philadelphia, yesterday before the Nineteenth Annual Meeting of the New Jersey Osteopathic Society in the Trenton House. "These sufferers, who formerly suppressed symptoms with alcohol in various forms," continued Dr. Bailey, "are unable to get it now, and they apply for treatment, and their cases become known. The disease numbers among its victims probably half of one per cent of the entire population of the United States."

Dr. Bailey said that war conditions exerted an unfavorable influence on hay fever. He pointed out that in cities the lack of housing and consequent congestion, high tension, high cost of nourishing food and the consequent lack of food all helped to reduce vitality to the point where susceptibility became much more prevalent than before the war.

Dr. Bailey, who is the founder of the first Hay Fever Clinic in Philadelphia, gave an idea of the results accomplished by this clinic, which was established at the Osteopathic Hospital there.

Epilepsy was another disease in which the osteopathic profession claims to have found a cure. Dr. H. W. Conklin, of Battle Creek, Mich., president of the American Osteopathic Association, declared that the secret lies with the profession and will never be given out until the medical profession is willing to admit that this discovery belongs to osteopathy. He claimed that many cases diagnosed as epilepsy are nothing more than convulsions, with no traces of epilepsy.

Dr. Conklin's address on epilepsy was given last night after the members had partaken of a banquet following the afternoon session. The doctor was the first speaker at the opening of the afternoon meeting, when he took as his subject, "Diabetes." He was followed by Dr. Bailey with his discourse on "Hay Fever." Dr. J. Ivin Dufur, of Philadelphia, spoke last night on "Osteopathic Hospital Treatment of Nervous and Mental Conditions."

Dr. Charles M. Sigler of this city was re-elected president. Dr. Ray F. English, of Newark, was elected vice president, succeeding Dr. Arthur L. Hughes of Bloomfield. Dr. Raymond S. Ward of Montclair was re-elected secretary, and Dr. Clinton O. Fogg, of Lakewood, treasurer, was also re-named.

There was a change in the executive committee. Dr. Hughes, who stepped out as vice president, being chosen a member of the committee, as was also Dr. Milbourne Monroe of East Orange, Dr. Edwin W. Tate of Newark, Dr. Fred E. Keefer of South Orange and Dr. A. P. Firth of Newark. The last two were re-elected.

Dr. Sigler and Dr. Walter Novinger of this city, Dr. Harry L. Chiles of Orange and Dr. Fogg were elected to the annual convention of the National Association, which will be held in Chicago in July.

—Front page, Sunday Times-Advertiser, Trenton, N. J., May 2.

**WEST VIRGINIA HEALTH COUNCIL'S  
LAST EXAMINATION**

**Special Medicine**

1. Give extrinsic muscles of eye and uses of each.
2. Give full directions for cleaning an eye in case of gonorrhoeal ophthalmia.

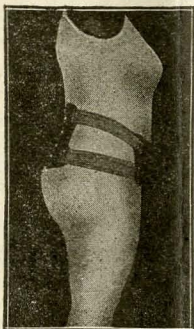
3. Differential diagnosis of glaucoma and iritis.
4. Give cause and treatment of epistaxis.
5. Directions for caring for eye injured with lime.
6. Give diagnosis and treatment of membranous croup.
7. Give diagnosis and treatment of ethmoidal sinusitis.
8. When should tonsils not be removed and reasons for not removing.
9. Diagnosis and treatment of peritonsillitis.
10. Give sign and symptoms of beginning acute mastoiditis.
11. Give sign and symptoms and treatment of Vincent's angina.

12. Give the cause and treatment of earache.

**Practice of Osteopathy**

1. What is the importance of the diaphragm in the treatment of hic-cough, sleeping sickness and acute indigestion?
2. How use inhibition as a local anesthetic? Where inhibit in cholelithiasis, appendicitis?
3. What is included in the treatment of thoracic lesions, pelvic lesions?
4. Give fully the treatment of insomnia.
5. What is the difference between neuritis, neuralgia and neurasthenia?
6. Give fully the treatment of pneumonia.

**Hundreds of the Foremost Osteopaths Are Using and Recommending Our EL-AR**



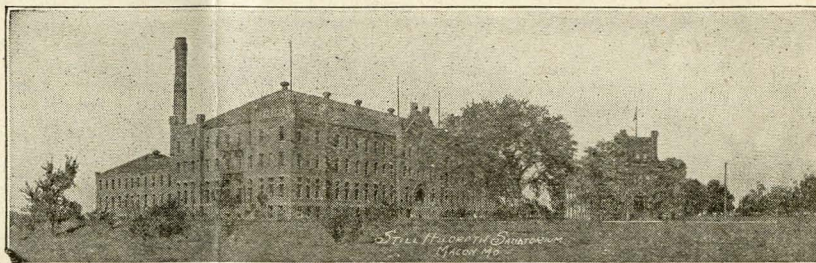
Sacro-Iliac Supporter, for the relief of Sacro-Iliac sprain, luxation and dislocation of the sacrum, for men and women.

Another important service performed by our supporter is, that it acts as an abdominal Supporter, preventing rupture and relieving all of those symptoms resulting from an unsupported heavy, pendulous abdomen.

This supporter is constructed along thoroughly scientific and practical lines and affords prompt and lasting relief for backache, pelvic aches and pains, lumbago and the long chain of aches, pains and weakness resulting from sacro-iliac strains, relaxation and dislocation.

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714 POST BUILDING - - BATTLE CREEK, MICH.



**Still-Hildreth Osteopathic Sanatorium**

MACON, MISSOURI

DEDICATED TO THE CURE OF NERVOUS AND MENTAL DISEASES

Address All Communications  
to the Above Institution.

A. G. HILDRETH, D. O.  
Superintendent

7. Etiology and treatment of amenorrhea? Dysmenorrhea?
8. Diagnosis, symptoms and treatment of influenza.
9. Treatment to relieve congestion of head.
10. Diagnosis, etiology, symptoms and treatment of atrophic cirrhosis of liver.
11. Diagnose exophthalmic goiter.
12. How treat Pott's disease, rheumatoid arthritis, flat foot and torticollis.

#### Chemistry and Medical Jurisprudence

1. Define chemical affinity, cohesion and adhesion?
2. What is understood by "valence," what is the valence of Ca., Na., K.?
3. Distinguish between fermentation and putrefaction.
4. What are the properties of an acid, of an alkali?
5. What is understood by double decomposition?
6. What is the average amount of solids in the urine; how determined?
7. How would you determine if urea or urates are present in excess in the urine?
8. Distinguish between mercurous and mercuric compounds?
9. Classify the ferments found in the body? Name one of each class?
10. Give symptoms and treatment of acute poisoning by salicylic acid and the salicylates?
11. What is rigor mortis? How soon after death does it appear?
12. Define insanity from a medico-legal standpoint.

#### Obstetrics and Gynecology

1. What bones form the obstetric pelvis?
2. What signs of pregnancy are determined by touch?
3. What are the immediate dangers of abortion?
4. What articles should be carried by the obstetrician?
5. Is it important to make a positive diagnosis of the presentation and position of the fetus before introducing the forceps? Why?
6. What are the indications for podalic version?
7. What are the contra indications to a vaginal examination?
8. Discuss drugs having some special action on the pelvic organs.
9. From what should you differentiate pelvic cellulitis?
10. What are the principal displacements of the uterus?
11. Define pruritus vulvae? Give the etiology, symptoms and write a prescription for the treatment.
12. How would you differentiate the fundus uteri from inflammatory deposits in the pouch of Douglas?

#### Anatomy and Embryology

1. Describe the foramen magnum, and what does it transmit?

2. Name the muscles and faciae of the anterior femoral region of the thigh.
3. Name the branches of the abdominal aorta.
4. Name the membranes of the spinal cord from within outward.
5. Give origin, insertion and action of the biceps muscle.
6. Of what does the lymphatic system consist?
7. Give a brief anatomy of the gall bladder.
8. Name the muscles of the forearm, nerve and blood supply.
9. Describe the development of the femur bone.
10. Describe the development of the kidney.
11. Describe the development of the clavicle bone.
12. Give a brief description of the early stages in the development of the human embryo.

#### Bacteriology and Hygiene

1. Discuss the effects produced by bacterial growth.
2. Name the routes of infection.
3. Describe the Gram method of staining.
4. Discuss the staphylococcus and its pathogenicity for man.
5. Describe the mechanism of immunity.
6. Describe the tubercle bacillus and name its channels of infection.
7. Discuss anaphylaxis.
8. Describe the sanitation of a dairy.
9. Discuss the sanitary privy and its relation to soil pollution.
10. Give the prophylaxis of typhoid fever.
11. Give the prevention of lead poisoning.
12. Describe the sanitation of a rural school.

#### Physiology and Histology

1. Discuss the nerve supply and the movements of the stomach.
2. Name the chief elements of food and describe their utilization in the body.
3. Give the histological structure of the bladder wall.
4. What sensations are received through the nerves of the skin?
5. Describe the blood plasma. How does it differ from blood serum?
6. What are cilia? Their function and where found?
7. Define: afferent, efferent, sensory, motor, trophic, inhibitory and vasomotor, as applied to nerves.
8. Describe the structure of compact bone.
9. What is the function of the adrenal bodies?
10. Describe the histological structure of the pancreas.
11. Discuss the nature and origin of urea.
12. Describe briefly the function of the liver.

#### Osteopathic Diagnosis

1. What are the cardinal points of Osteopathic diagnosis?
2. How do you use the "Osteopathic Centers" in diagnosis?
3. What is the Osteopathic value of hyperesthesia?

4. Explain fully how you would make an Osteopathic diagnosis of diseases of the stomach and lungs.
5. Give diagnosis of asthma and treatment of same.
6. Give differential diagnosis of locomotor ataxia and hemiplegia.
7. Give symptoms and diagnosis of dislocated shoulder as compared with fracture of head of humerus.
8. Give fully the Osteopathic diagnosis of influenza, also treatment and prognosis.
9. Diagnosis of brachial neuritis and treatment.
10. How distinguish a joint immovable from a fibrous ankylosis, a joint immovable from a bony ankylosis? Explain and illustrate fully.
11. How differentiate spasm and stricture of oesophagus? Pharyngitis and laryngitis?
12. Diagnosis of renal calculi, uremia, cirrhosis of liver.

#### Principles of Osteopathy

1. State definitely the principles that are fundamental in osteopathy. Illustrate.
2. What are three main divisions of Osteopathic therapeutics?
3. Describe a lesion, give causes and diagnosis of same.
4. Define scoliosis, kyphosis, lordosis. Treatment of each.
5. Give Hilton's Law; Head's Law. State how used osteopathically.
6. Why does a lesion of any vertebrae not always produce like results?
7. Explain fully how a slipped intervertebral disc could produce sciatica.
8. With a 2nd lumbar spinal lesion, what conditions would you expect to find during pregnancy and labor?
9. What is the effect of the heart beat and respiration of stimulation of the central end of cut sciatic nerve? Of the peripheral end of a cut pneumogastric nerve?
10. Explain fully how innominate lesions may be responsible for perverted functioning of pelvic organs.
11. What is muscle tone? How is it maintained?
12. Explain fully how and through what medium the nervous system controls organic activity.

#### DR. Gerdine Goes West

Dr. L. Van H. Gerdine of the Still-Hildreth Sanitarium at Macon left Monday for Dallas, Wichita Falls, Fort Worth and Galveston, Tex., enroute to Los Angeles, Cal. In Texas Dr. Gerdine will attend the Osteopathic State Meeting at Galveston, then visit his family in Los Angeles for a few weeks. Mrs. Gerdine will come with him as far as Denver on the return trip, where she will spend the summer.—Kirksville Daily News, April 30th.

10,000 STUDENTS BY FALL

**BOSTON OSTEOPATHIC SOCIETY  
APRIL MEETING**

The regular monthly meeting of the Boston Osteopathic Society was held Saturday, April 17th, at Faelton Hall, Huntington Chambers.

The following program was given:

"Some Interesting Cases for Osteopaths," Dr. Helen G. Sheehan, Boston.

"Technique for Rib Lesions," Dr. Perrin T. Wilson, Cambridge.

"Condensed Osteopathy," Dr. W. Arthur Smith, Boston.

"Some Phases of Diagnosis," Dr. Howard Crawford, Boston.

"Case Reports," Dr. Francis K. Byrkit, Boston.

"Innominate and Foot Conditions," Dr. Harold Frost, Worcester.

**HAVE YOU YOUR HOTEL RESERVATION?**

**DOCTOR OF OSTEOPATHY TO BE  
CONFERRED ON FORTY-FOUR  
SATURDAY, MAY 29**

**Address Will Be Given to Class by  
Major General Glenn of the  
U. S. Army**

**Rev. Condit to Give Baccalaureate  
Sunday**

**State Board Examinations Will Be  
Given Next Week—Lower Class  
Exams Start Today**

Forty-four women and men will be presented diplomas conferring upon them the degree of Doctor of Osteopathy by the American School of Osteopathy at the graduation exercises to be held at the Princess Theater Saturday morning, May 29, at 9 o'clock. Dr. George A. Still is to be master of ceremonies on that occasion.

The address to the class will be given by Major General Edwin F.

Glenn, of the United States Army, whose home is at Chillicothe, Ohio.

The baccalaureate sermon will be delivered by the Rev. Fred W. Condit, pastor of the Christian church, at the church Sunday afternoon, May 23, at 2:30 o'clock.

The lower classes are taking their examinations today and tomorrow and many of them will leave at once for their homes.

The Missouri State Board will conduct examinations here next week, beginning Monday morning and continuing for four days. The majority of the graduating class will take the examination and a number from the Des Moines School of Osteopathy are expected to be here for the examination.

The following is a list of those who will be given D. O. degrees on May 29:

- Basset, V. C.
- Becker, A. F.
- Betournay, L. W.
- Billington, T. G.
- Bodenhamer, W. E.
- Broadston, J. H.
- Bullard, Veva
- Bush, F. L.
- Carrico, J. O.
- Cooter, W. V.
- Davis, R. E.
- Ewing, C. B.
- Farthing, Mary Ann
- Flockton, Priscilla
- Halladay, J. E.
- Heldt, C. H.
- House, M. S.
- Howes, Mrs. Anna
- Hulburt, R. G.
- Kelly, Laura
- Lawrence, J. W.
- MacDonald, G. A.
- Martin, Mrs. Nina
- Morgan, T. L.
- Moulton, Olive H.
- Murray, D. R.
- O'Connor, J. J.
- Peterson, Mrs. Claire
- Pollock, Mrs. Edith W.
- Reed, A. G.
- Sherrill, G. P.
- Slocum, H. I.
- Slocum, L. Evelyn
- Sneed, G. F.
- Snider, C. K.
- Sprenger, J. W.
- Stevens, Geraldine
- Tuttle, Clara S.
- Vowles, B. S.
- Wallace, D. B.
- Walton, R. H.
- Weitzel, L. A.
- Whitmer, E. B.
- Wieters, Julia

—Kirksville Daily News, May 20th.

**OTTARI**

**AN INSTITUTION FOR THE OSTEOPATHIC CARE  
OF NON-COMMUNICABLE DISEASES**

**ASHEVILLE, N. C.**

Dear Doctor:

A mild climate, rest, diet, baths and ideal surroundings combined with Osteopathic care is what your post-influenza and chronic cases need.

Our profession needs equipment and endowment for research work. All profits of OTTARI go ultimately to the A. T. Still Research Institute. No dividends nor salary go to the management, and our books are open to any accredited representative of the Trustees of the R. I.

Any patient can be well cared for at OTTARI for forty dollars per week—including all professional services, board and room—but we have suites and choice rooms at higher rates. Private and semi-private nurses cost extra, but nurses are provided at no extra cost to carry out all orders of the physician.

Help your patients—who will thank you, help your profession—that has already helped you, by recommending OTTARI.

Descriptive literature on application to  
OTTARI,

R. F. D. No. 1,

W. Banks Meacham, D. O., Asheville, N. C.  
Physician-in-Charge.

### WISCONSIN ASSOCIATION HAS PROFITABLE MEETING

#### Twenty-Second Annual Convention

While the number of Osteopathic Physicians in Wisconsin is rather small they make up in enthusiasm what they lack in numbers.

The demand in this state for Osteopaths is very great, yet for some unknown reasons the new graduates seem to locate elsewhere. Strenuous efforts are being made to induce these new graduates to look into the field of Wisconsin before deciding definitely upon future locations.

The Association passed a resolution urging all the colleges to bring all their standards up to the requirements of the Wisconsin law, in order to permit their graduates to qualify.

Resolutions were passed starting an immediate campaign to counteract the efforts being made in various parts of the country to shut out the Osteopathic profession from public hospitals. These resolutions will be carried to the meeting of the House of Delegates at Chicago with the purpose of instigating further plans for a nation-wide campaign.

Officers elected for the ensuing year are as follows:

Dr. Eliza M. Culbertson, Appleton, President.

Dr. J. J. McCormack, Sheboygan, Vice-President.

Dr. E. J. Elton, Milwaukee, Secretary.

Dr. L. H. Noordhoff, Oshkosh, Treasurer.

The Association voted to become a Division Society of the A. O. A. and elected Dr. E. J. Elton, Milwaukee, as delegate to the first House of Delegates, and Dr. F. R. Thornton, La Crosse, as alternate.

The next meeting of the Association will be held in Milwaukee probably in the fall.

#### Program

##### Tuesday Evening, April 20th

Conference of all officers and committees. Any member cordially invited to be present.

##### Wednesday, April 21st

9:30 A. M.—Little Things Often Overlooked in Making a Diagnosis:

1—From the Structural Viewpoint

—Dr. A. W. Brockway.

2—From the Laboratory Viewpoint—Dr. A. H. Doe.

3—In the Alimentary Track—Dr. E. C. Bond.

4—In Organic Comparisons—Dr. F. A. Wright.

10:30 A. M.—Some Ordinary Forms of Rheumatism and Their Treatment—Dr. F. R. Thornton.

11:00 A. M.—A Professional Problem—Dr. R. W. Risley.

11:30 A. M.—Business.

1—Reading of Minutes.

2—Appointment of Convention Committees.

(a) Resolution and Necrology.

(b) Auditing.

(c) Special—if any.

3—Election of Applicants.

12:00 M.—Noon recess.

1:30 P. M.—Osteopathic Treatment of Acute Infections—Dr. A. W. Matern.

2:00 P. M.—Constitutional Effect of Pus Conditions—Dr. E. J. Breitzman.

2:30 P. M.—The Therapeutic Value of an Exclusive Milk Diet—Dr. Harriet A. Whitehead.

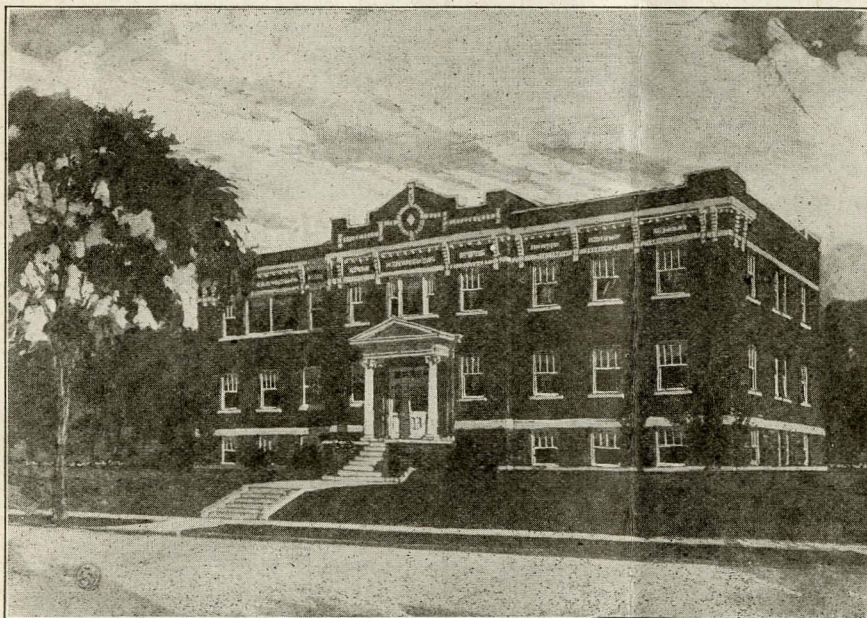
3:00 P. M.—Reports of Standing Committees:

1—Publication and Education—Dr. E. C. Murphy.

2—Public Education—Dr. C. C. Hitchcock.

3—Finance and Development—Dr. Geo. M. McIntyre.

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**Kirkville, Missouri**

Health—Dr. Harriet A. Whitehead.

5—Legislative Committee.

6—Special Committee on Legal Defense—Dr. F. N. Oium.

4:30 P. M.—The Relation of Osteopathic Service to Industrial Efficiency—Dr. E. S. Comstock.

5:00 P. M.—Report of Treasurer.

Consider Question of Becoming a Division Society of the A. O. A.

6:30 P. M.—Informal Leap Year Supper.

8:00 P. M.—Executive Session.

Election of Officers—

- (a) President.
- (b) Vice-president.
- (c) Secretary.
- (d) Treasurer.
- (e) Mem. Exec. Bd., succeeding Dr. Whitehead.
- (f) Member Leg. Com., succeeding Dr. J. R. Young.
- (g) Five names to Governor.
- (h) Representative to House of Delegates.

**Thursday, April 22nd**

8:30 A. M.—Practical Clinical Analysis. Cases will be presented by Dr. W. L. Thompson with History and Laboratory Findings where indicated, and further examination will be made by members present. It is suggested that each bring a B. P. outfit and stethoscope.

10:30 A. M.—Open Forum on Everyday Problems.

11:00 A. M.—Business.

(a) Reports of Convention Committees:

- 1—Resolution and Necrology.
- 2—Auditing.
- 3—Special—if any.

(b) Choose Next Meeting Place.

(c) Installation of Officers.

(d) New Business.

1—Continuation of Bulletin.

(e) Final Adjournment.

12:00 M.—Luncheon.

1:00 P. M.—Trip to Kohler.

**Sidelights**

We all like to keep out of the rut. That's why I'm submitting these few pages in lieu of the usual reading of an annual report. I hope it will please all. Isn't it funny how some State Secretaries get tired of their job.

Listen! Out of the 55 MEMBERS we can count 34 REAL ONES—LIVE ONES—those who RESPOND PROMPTLY—and, like Channing says, "ACT QUIETLY."

Three times during the year inquiry letters were issued—result: 15 members replied to ALL THREE LETTERS; 13 replied to TWO; 9 replied

to ONLY ONE. Of these total 37 replies all but three were prompt in their remittance to the Treasurer. Therefore, we have with us—21 MEMBERS WHO SHOW LITTLE INTEREST IN THE ASSOCIATION. Net loss through Secretary's office, 63c. Wonder if they feel like it.

WHEN IS A MEMBER NOT A MEMBER? Ask the Treasurer.

LIVE WIRES ARE GREAT AND POWERFUL THINGS—and as one member put it a few years ago—"Everlastingly keep pounding away to keep all awake and alive to the fact that they need the association and the association needs them! The association is what the individual makes it; our strength is in our unity."

One can hardly understand why it is necessary to pound any D. O. to keep him awake when they are recognized as the most wide-awake class of health producers in existence. We make a guess that it is only the self-centered ones who need a little pounding. That's why we have taken this method of striking—does it hit anybody here?

That's the worst of it—the ones who need the greatest awakening are usually at home "taking a nap."

There is an individual in this state who writes: "To hell with science," then proceeds to characterize some of our people as "dudes and dishwashers"—"moss-covered"—"deadheads"—etc., but heralds the glad tidings that the word "osteopath" will be removed from all his literature as he is ashamed to call himself an osteopath while in our company. Let us thank the Lord for this blessing.

Sometimes we are glad to reduce the number of practitioners in this state.

Fifteen good-sized cities in this state want an OSTEOPATHIC PHYSICIAN.

WE CANNOT SUPPLY THE DEMAND UNLESS WE SUPPLY STUDENTS.

GOSH! Here's a member who says, "the thought occurs to me that there are so many of US DEAD ONES in the state and perhaps if SOME OF US WAKE UP it might be an inducement for others to do the same." Now if this isn't a most courageous, optimistic statement to make—just try to beat it and we'll give you a gold medal.

ELTON, Secy.

**NORTH CAROLINA EXAMINATIONS  
JULY 9th AND 10th**

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the South," ranking fourth (in the U. S.) in agriculture, offers a number of good locations to good osteopaths who wish to establish themselves permanently.

The state has no large cities—just small towns. If you are fitted for one of these, it is waiting for you. Every section of the state is prosperous. The officers of the Examining Board and of the State Society will lend every aid in assisting you in getting established.

A four years course is required. The next examination will be held in Raleigh on July 9th and 10th. Examinations are fair and practical.

Reciprocity may be granted to those licensed in states demanding equal requirements.

Because of many inquiries in re reciprocity it may be well to define the Board's position on the subject. We are not trafficking in licenses, but are issuing only to those who expect to immediately locate in the state for permanent practice. In fact, our procedure is this: An applicant who is eligible, and who furnishes satisfactory recommendation from his state officers will be granted a temporary permit on coming to the state. At the next meeting of the Board of Examiners his permanent license will be issued.

For application blanks or further details address:

W. B. CRUTCHFIELD, D. O.,  
Secretary, Greensboro, N. C.



# Osteopathic Truth

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OSTEOPATHIC PROGRESS

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FOR THE OSTEOPATHIC PROFESSION

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MAY, 1920

I am not bound to win, but I am bound to be true—I am not bound to succeed, but I am bound to live up to what light I have—I must stand with anybody that stands right; stand with him while he is right and part with him when he goes wrong.

—Abraham Lincoln.

# Insects

## Fake Osteopaths

Last summer we paid a visit to one of the large cold storage plants for fish along the Atlantic seacoast in the State of Maine. One of their main products was herring, from the small one to the largest.

As we were nosing around, we came upon a small barrel about half full of rotting herring which were fairly alive with insects—magots. These insects were thriving upon the former flesh of a good fish.

The other day we received a letter from one of our good doctors in a not far distant state in which he enclosed a letter from an M. D., D. O., which begins like this: "My Dear Doctor: Many of our fellow Osteopaths write to me that they consider — the ideal adjunct in their practice, etc." Along with it a sheet headed "The Opinion of the Profession." This sheet has everybody on it, from real D. O.s to the worst of Fake Osteopaths with ninety and nine degrees.

A few days later we received a four-page pamphlet heralding the rankest of the rank as a candidate for the high office of President of these United States. This insect boosts a college for the teaching of fakery or real osteopathy. Any degree you want he can supply.

### Where Did They Get It?

A real D. O. is only those who have graduated from a school recognized by the American Osteopathic Association. These insects cannot pass any osteopathic law of any state, yet they pass under the D. C. (Fake Osteopathy) banner and then flaunt the D. O. sign to the breeze and we sit idly by and let them get away with it. There is a law in every state in the Union against securing business or selling something under false pretenses. Still, we sit.

The insects are sapping the life blood out of the good fish and growing fat thereby.

### Another Insect

We have another insect. This insect truly graduated from a recognized osteopathic college, but he has no principle, no willingness to fight for osteopathy; only the blood-sucking tendencies to sap the life fluid from the good fish.

These insects are those who treat from fifty cents up. Prices are not judged by the ability of those to pay,

but are arrived at from the trading standpoint—what they can get from the victim. They undercut their colleagues in the same town, refuse to join forces for the betterment of osteopathic practices, but slink around ready to sap the life fluid from those that gave them birth.

### Mixing Insect

There is still another variety, and that is the one that uses vaccines, serums, aspirin, salts, castor oil, lobelia, paregoric, violet rays, vibrators, etc., and says that, "Osteopathy is alright, but I need some drugs." There is only one drug they need and that is a large enough dose of pure carbolic acid to end their misery.

Along with this type goes the one that gives a massage rubbing treatment and calls it Osteopathy. He cannot make an adjustment and would fall in his tracks if by accident he should move a vertebrae or rib. One doctor visiting in Buffalo recently went to a D. O. and got a rubbing. Disgust was no name for the feeling, so the doctor went to a (Fake Osteopathy) and got an adjustment.

### Question and Answer

The question arises as to whether the Profession of Osteopathy has not absorbed too many \$40 school teachers and clerks instead of astute business men and women. The former are afraid they will not satisfy the patient and need everything at hand so that one guess might strike the spot as to what the patient wants; not what they should have.

Another question arises as to how many of these insects really try to learn how to give a real adjustive treatment after they leave school, if they failed to learn how while there.

How much have they trained themselves in real business methods in order that they may not cut off their own noses to spite their faces in undercutting the price of their colleagues. They ruin the business for both.

The answer lies in a uniform teaching of Osteopathy and the adoption of Dr. Still's Platform as the standard by which all action of the individual and associations shall be judged. This is the fire by which the insects may be destroyed or developed into a higher order of being.

**IS THIS A PART OF THE A. M. A. STATE MEDICINE PLAN?**

**To Whom Does a Child Belong, Parent or State?**

**Scientist Is Convicted of Child's Death**

Newark, N. J., May 5—Andrew Walker of Bloomfield, N. J., was convicted of manslaughter with a strong recommendation for mercy as a result of his daughter Dorothy's death from diphtheria under Christian Science treatment, by a jury before Judge Osborn tonight.

The verdict was returned at 10:30. Twenty minutes earlier the jurors, who had been out five and one-half hours, came in and handed up this finding:

"We find Walker guilty of criminal negligence."

The court ordered them to reframe the verdict to make it correct. The jurors retired for a few moments and came back with the final verdict.

Howard MacSherry, counsel to Walker, immediately announced that he would appeal the case, taking it to the United States Supreme Court if necessary.

**Sentence Next Monday**

Walker, who was with his wife in court, stood silently facing the jury when they returned the verdict. He appeared to be in a daze, as did Mrs. Walker and twenty-five other women Christian Scientists who had waited in court. Opinion of observers of the trial has been that Walker would be acquitted.

Walker's bail of \$2,500 was continued until Monday, when he will be sentenced. There is only one degree of manslaughter in Jersey. The maximum penalty is five years.

It is within the province of Judge Osborn, however, to make the punishment nominal, particularly as the jury urged him to be merciful.

Judge Osborn had directed the jury to acquit Mrs. Walker on the legal ground she was subservient to her husband.

**Child Had Diphtheria**

Before the deliberations began the court and counsel for the state told the jurors they were to decide this question:

"Whether Dorothy Walker's father was guilty of gross negligence in taking upon himself the right to decide the fate of his daughter by applying his religious beliefs to her case when she was seriously ill with diphtheria."

"I feel," said Judge Osborn in his charge to the jury, "that it is the duty of the jury to determine this question of fact—to say whether Mr. Walker was telling the truth when he said he acted conscientiously toward Dorothy in her illness, and followed religious beliefs in which he has full faith. Otherwise the door is left open for defendants to come into court and hide behind the cloak of religion."

**Law Permits Healers**

Howard MacSherry, of counsel for the defense, said in summing up:

"Who is to judge what is the proper thing to do regarding giving a sick person the proper medical treatment? Christian Scientists are licensed by the State of New Jersey to practice their faith in just the same sense as are allopaths, homeopaths and osteopaths. And they all disagree among themselves. Are you going to say that this defendant had no right to call upon a Christian Scientist healer when the state authorizes that healer to practice?"

"Medicine is not an exact science. A few years ago they starved a man who had typhoid fever; now they give him all he wants to eat.

"It is the same with many other types of cases; the science is changing around all the time. Is there any of you twelve men who feels himself fit to pass judgment on what another man's religious belief shall be?"

With Assistant Prosecutor Bernhard, who conducted the state's case, the issue was the stern one of a violation of New Jersey's statutes.

"The eyes of the world are upon this jury today," he said, "wondering if, by its verdict, it is going to permit the little girls and boys of the country to be denied the best medical care and attendance that human knowledge and research has provided. Are you, by your verdict, going to serve notice that any other parents who adhere to this faith may be permitted with impunity to subject their children to the same sort of treatment and risk their children to the same fate that Dorothy Walker met?"

—Chicago Herald and Examiner, May 6.

**WALTER J. FORD, D. O., DEAD**

Dr. W. J. Ford was born in Adair county, April 21, 1878, died April 18, 1920. Was married to Dr. Roberta Wiemer, August, 1908. He graduated at the A. S. O. school about 19 years ago and practiced in Chariton, Iowa, for a number of years. While in Chariton he made a host of friends who regretted to see him leave but as winters were so cold and he was not strong, he went west to find a more pleasant climate. He located in Seattle, Washington, and he was stricken with a cancer two years ago, which caused his death. All was done for him that loving hands could do but he was called away. He was a true Christian, was ready to meet his Heavenly Father, and wanted to go.

He leaves a wife, Dr. Roberta Wiemer Ford, an aged mother, Mrs. Jane Ford, of Kirksville, two brothers, David E. Ford, who is now in Idaho, and Dr. Aura B. Ford, who was a partner with him in Seattle, and one sister, Mrs. James Moorehead, who lives southeast of Kirksville.

Dr. Ford was loved by all who knew him, which was shown by the messages of sympathy his loved ones received during his long illness and death. A big auditorium at Seattle would not hold the people who came to show him their last respects and loads of flowers were always in his sickroom and on the casket also.—Kirksville Daily News, April 30, 1920.

**DR. DEL MARTZ THROWS HAT IN THE RING FOR CORONER RANDOLPH CO., MISSOURI**

From Moberly Democrat:

In this issue of the Democrat will be found the announcement of Dr. D. Martz as a candidate for coroner of Randolph County, subject to the action of the voters at the democratic primary on August 3.

Dr. Martz is one of the leading young practitioners in the county. He is well known and highly esteemed by all. He expects to see as many voters as possible before election day and asks for a consideration of his claims upon the assurance that if successful he will do his whole duty at all times without fear or favor and with an eye single to the public good.

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**CONVENTION**

**JUNE 28-JULY 3**

**SOMETHING TO THINK ABOUT?**

Are you a real Osteopath or are you rummaging in the junk pile of the drug school?—McCole.

## The Purpose of Disease

Geo. W. Reid, D. O., Worcester, Mass.

We hear and read a great deal about disease—its cause, symptoms, treatment and results—but I do not believe I ever did read an article dealing with the purpose of disease. This subject indeed has been largely ignored or overlooked. While our conception regarding disease has changed greatly from what it was two or three decades ago, yet there is no doubt that our minds are still actuated to a certain degree by the conceptions originating before the dawn of science.

The early conception of the purpose of disease was that it came to punish, torment, plague, etc. It was significant, therefore, principally from the moral and spiritual standpoint. Many queer practices grew out of this conception, such as the offering of sacrifice and the resort to charms and incantations. Practices akin to these are still in vogue not only in benighted countries but even in this land of ours. The rabbit's foot and the horse chestnut are still used to keep the hoodoo away, especially among the colored population of the South.

There is a fundamental purpose back of all disease, which is best expressed in the term self-preservation. The object of all disease is to preserve the individual. The symptoms give warning of trouble, and provided they are properly interpreted and heeded in due season, life will be perpetuated to its natural span, barring accident of course. Disease then, instead of being a curse or pest, is in reality a blessing and should be so considered at all times. The functions of the organs of the body are always in harmony or in accord with the conditions present, and these determine the nature and character of these functions. Thus it may be truly said that disease is just as natural as health. One represents orderly functioning while the other represents disorderly functioning. Each comes in obedience to the law of cause and effect.

By carefully studying into the bodily reactions or crises we speak of as disease, which, as has already been stated, are evidences of the practical

operation of the law of self-preservation, we find several factors may be responsible for these reactions. Chief among these factors, however, may be mentioned fatigue and filth. The organs of the body become fatigued or exhausted partly because of over-taxation of the nervous system in general and partly because of over-taxation of the organs themselves in particular. The organs most frequently exhausted are those connected with the digestive function, as the digestive function is more frequently abused than any other. When these organs become fatigued or exhausted they cannot adequately do the work that is demanded of them. Thus poisons continue to accumulate in the system, and the fatigue increases until a violent reaction is necessary in order to save the organism from destruction.

The usual acute disease, therefore, represents what may well be termed an acute eliminative crisis, and if treated with this thought in mind the results will be all that possibly can be expected.

When the purpose of these reactions is to promote rest and cleansing, it is criminal to do anything that does not

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conform to this purpose. Water is one of the best cleansing agents known and should be used freely, both externally and internally, by rectum as well as by mouth. I have often said that gargling the throat in case of cold is in reality gargling the wrong end, that attention should be given primarily to cleansing the rectum and alimentary tract rather than to the use of antiseptic washes in the throat.

To promote physiological rest, it is best to have the patient go to bed and enter upon a fast. This also promotes cleansing, because nothing is put into the system that can in any way produce more poisons. There is no doubt in my mind that the usual diet prescribed in fevers is injurious rather than helpful, as food taken into the body when fever is present decomposes rather than digests. The only food that should be prescribed when fever is present is water, fruit juices and, perhaps, plain vegetable broth, preferably made from green vegetables. This does not tax the digestion, it does not offer anything to the system that is going to decompose and produce more poison; but on the other hand it furnishes the alkaline bases which are nearly always deficient when acute disease is present.

It is highly important that the true conception of disease be more generally known. It should be pictured in its true light, not as a cure but as a blessing. The November number of Physical Culture, which contained a valuable article on the flu by our own versatile Dr. H. B. Bunting, had for its cover design a man engaged in combating an assault by a flock of vultures. The illustration was supposed to portray the conflict between man and the flu, being labeled "Combating the Flu."

This is a fairly good example of the misconception that is everywhere present regarding the purpose of disease. Practically all of our journals picture disease as an enemy to the human race, as something to be fought and subdued just as you would fight and subdue an opposing army. So long as this idea prevails, just so long will disease continue to baffle mankind and claim its usual toll. As osteopathic physicians, as physicians who are in a position to know the real and true purpose of disease, it is our duty to help dissipate the universal darkness surrounding this subject by making known these simple facts, along with that of mechanical adjustment.

**TELLS OF HIS EXPERIENCE WITH OSTEOPATHS**

Following is taken from the Macomb Journal:

P. R. Wilmarth of Vermont has been laid up with flu and tonsilitis. While thus afflicted he tried everything known to medical science and finally pulled through with the aid of an osteopath. Here is his testimony as published in the Union:

"We have been taking some treatments of an osteopath and some of our friends have been asking us to tell what it is like. Well, as near as we can tell it, it is like this: He unfolds and sets up a folding ironing board (think he calls it a treating table) and we sit down on the edge of it. He then takes our right arm and ties it in a hard knot around our neck, takes hold of our left foot and brings it up around our left shoulder and around under our chin, hooking the toe under the right ear so that it will not slip out of place. While we are in this position he takes us by the neck and swings us around his head until our backbone snaps like a cattle whip. He then unties us and repeats the same operation with the other arm and leg and swings until we bust loose some place else. Then we lie on our side and he takes hold of one of our hip bones, says something to attract our attention from what he is doing, and then takes advantage of our distraction and suddenly bends our hip until he breaks something loose that sounds like the ice breaking up in the river. Then he has us lie flat on our stomach and he grabs our spinal column with both hands and pulls it out as far as he can and snaps it back like a sling rubber. He does this until he gets tired, then he gets up on our back and walks back and forth, pushing in the joints of our rusty backbone with his heels. Prof. Walter, who is also taking some treatments, says he uses a club on him, but if he has ever done anything but hit us with his hands and feet we haven't caught him at it. After he has done all that he can think of he has us lie on our back and he goes up to the end of the ironing board and takes us by the neck and pulls us around by it until he exercises all the rubber that it contains. As a grand finale he grabs us by the head with both hands, twists our neck until it sounds like a whole package of fire crackers touched off at once and we see a great display of fireworks. Then with a sudden twist to

the other side he repeats the display, jerks you to a sitting position, smiles, and says: "That is all for this time." Our size and shape doesn't permit him to do any but plain stunts with us, but we are told that Walter's long legs and arms gives him an opportunity to tie him up in some extremely fancy shapes and do some real artistic stunts with him. Some folks may not have any faith in this kind of doctoring, but we can't help but think it does some good, for we can't believe that any disease could possibly help being shaken loose and annoyed some by the gyrations we have performed. Why, it even loosens up our New Year's resolutions."—Dallas City (Ill.) Review, April 27th.



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

## The Definition and Scope of Osteopathy

L. E. Page, D. O., Newport, Vt.

The word osteopathy should have a definite meaning and should always be used to express a specific conception. Osteopathy, the philosophy of health and disease, and osteopathic technique are distinct. The word osteopathy is very often used loosely with the result that it may sometimes be understood as meaning a system of healing and again it refers merely to osteopathic technique.

The word osteopathy should be used to denote a system whose tenets and theories embrace the whole field of health, and the normal human body; disease, its causes and symptoms; the diseased body, and its pathology; and the treatment of all diseased states. The term osteopathic technique should mean all methods of treating disease by use of the manual manipulative measures which have originated in the osteopathic profession. This distinction is necessary to avoid confusion for many simple measures that are used daily in osteopathic treatment are certainly not osteopathic technique. Enemas, hot baths, mental suggestion, and many other things, are used in osteopathic treatment which cannot be called a part of osteopathic technique although they come under the head of osteopathy just as they are considered a part of medicine.

Osteopathic technique consists in any measure manipulative or other-

wise that has originated in the osteopathic profession, such as methods to correct spinal lesions, stimulate nerve centers, or to produce bowel action. These are the things that give osteopathy the right to an independent existence. They are the original contributions of osteopathy to healing methods. Osteopathy itself is much more. It is a whole system of principles which has an application to all branches of knowledge relating to diseases and its scope includes all facts relating to the treatment of disease. Osteopathy maintains that the human body is an organism produced by the natural laws which govern all living matter; that the functions of the body represent the sum total of the functions of its component cells; that the function of each cell depends directly upon nourishment through its blood supply and energy through its nerve supply; that both nerve and blood supply must be free and intact to preserve a condition of health; that disease is a manifestation that certain body cells are not functioning normally; that disease is primarily caused by an interference with blood and nerve supply, either by structural abnormality or the presence of poisons in contact with the body cells or fluids; that the restoration of health after disease is brought by natural defenses which have been developed by the body to overcome bacterial tox-

ins and to restore damaged or destroyed cells; that the rational treatment of disease should be directed toward restoring the structural integrity of the body and the use of all measures that will encourage or favor the action of the body defenses; that structural abnormalities most often occur in the spinal column between the vertebrae, and that these may cause disease by interference with the spinal nerves directly and the sympathetics indirectly; that the methods discovered by the osteopathic profession for correcting such abnormalities constitute osteopathic technique; that these methods constitute the most important part of the treatment of disease; that no substances other than food and water can furnish substance or energy for the body nor can they in any sense be considered as curative agents in the treatment of disease.

It will be seen that osteopathy embraces the whole field of health and disease. It rests on the laws of biology that determine the structure and functions of organized beings which depend upon certain physical conditions for their successful execution. The functions of respiration, digestion, assimilation, secretion, metabolism, reproduction, circulation, and mental activity all depend upon functions of individual cells. The conditions that determine cell activity in the body are structure, nourishment, and nerve energy and upon these depends the state of health for disease.

The function of a cell determines its structure. The gland cell must be large enough to permit the formation and retention of its secretion; the cells of the epidermis are flattened out to protect; the fat cell can contain but little cytoplasm to provide for the accumulation of fatty compounds; the spermatozoon must be adapted for motion in fluid. If a particular type of cell is to perform its special function it must preserve its structure and any agency that impairs its function by altering or destroying the structure causes disease.

The nourishment of a cell must reach it by way of the blood and lymph. This nourishment must not only be sufficient to keep the cell body growing but in the case of the secretory cell it must also provide the material out of which the cell may form its secretion. The substances in the blood must be such as the cell can use to build into its own structure or to manufacture a secretion. Since func-

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tion depends upon the substances brought to it by the blood and lymph it follows that any factor which alters the quality or quantity of these substances will cause disease.

The nerve force to the cell gives it the power to manifest its function. The cell must not only preserve its function and receive nourishment but it must be activated by nerve energy. In the most simple organisms like the protozoa the cell produces its own nerve force but in the human body the nerve cells are set apart for that purpose and must not only supply themselves but the remaining body cells. If this nerve force is diminished or destroyed in its production in the nerve cell or in its transmission by the nerve fiber a disturbance of function and consequently disease necessarily results.

Health exists when these conditions are all fulfilled, and disease results when any of them are interfered with. But the obscure processes by which food elements are converted into blood, lymph, saliva, gastric juice, nerve cells, epithelium, etc., are chemical problems that have never been solved. The transformation of the potential energy contained in proteins, carbohydrates, and fats, into nerve force is a process too complex for human understanding. These processes may be increased, diminished or stopped altogether, but never altered in character. There is no substance known to man aside from food elements that can substitute by its chemical action the obscure transformation exhibited by metabolism. The chemical laboratory of the cell alone must produce new cells, secretions, antibodies, opsonins, or any other substance used by the body either in maintaining health or overcoming disease.

Osteopathy then asserts that health depends upon the conditions just considered, viz., structure, nourishment, and nerve force, and that any agency whatever that acts as a disturbing factor to these conditions is a cause of disease. No system could hold broader or more scientific principles regarding health and the causes of disease than these.

All recovery from disease is brought about by restoration of the conditions of health. The restoration is brought about by the removal of the causes of the disturbance of structure, nourishment, or nerve supply. The body itself has provided the means in the formation of antibodies,

opsonins, in the regeneration of cells, in phagocytosis, and in the coagulation of blood.

The actual recovery from disease depends altogether upon the action of these body defenses. Like the normal physiological processes they are complex chemical problems that defy analysis. They may be encouraged and conditions may be made favorable for their action but there is no substance outside of the living body that can substitute its action for theirs. Were it not for these body defenses the broken arm could never unite, the bacterial toxin could never be neutralized, the hemorrhage could never be checked. Were it not for the regeneration of cells, the formation of antibodies, and the coagulation of blood, the treatment of disease by any method would be useless.

The treatment of disease resolves itself into an attempt to aid the body defenses and to render conditions favorable for their action. Any measure of whatever nature that will favor the restoration of structure, nourishment, or nerve supply to diseased cells, is legitimate treatment. Such treatment may consist of a regulation of the food intake, temperature, or social surroundings. It may be the repair by mechanical means of damaged or misplaced structures or by the artificial stimulation of some of the necessary body functions or protective agencies. But it will never consist of the administration of any substance with the intent to substitute for the

complex physiological or protective processes provided by nature. Furthermore, the best treatment for any condition is that which will produce the best possible restoration of the conditions of health with the least possible injury to the organism.

The practice of osteopathy consists in the diagnosis and treatment of disease according to the principles set forth above. The object of diagnosis should not be merely to classify the disease, but to determine the location and nature of any structural abnormality which is interfering with structure, nourishment, or nerve supply. In diagnosis as well as treatment osteopathy has made original contributions consisting in the discovery of osteopathic lesions in and around the spinal column. The location and severity of such lesions will very often suggest the diagnosis but the osteopath should not depend altogether upon spinal lesions in his search for pathology. X-ray, laboratory methods, history taking, observation of symptoms and signs all make up a complete diagnosis. After the diagnosis is made the physician should know what the disease is, its probable cause, the past course, the future tendency, the nature and location of the pathology, and the chances for bringing about relief or cure. Only when all of these conditions are fulfilled can a case be considered as diagnosed. The knowledge necessary for accurate diagnosis is extensive. It is derived from anatomy, physiology, chemistry,

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After having made the diagnosis the physician is ready to administer the treatment. The first principle of treatment is to remove the cause whenever possible. If possible this should be accomplished by osteopathic technique by removing or correcting osteopathic lesions. Outside influences should be regulated which are acting as causative agents such as poisons. In other cases it will be necessary to remove the patient to more favorable conditions as a higher altitude, changed social conditions, etc. If osteopathic technique is insufficient to secure the removal of the cause surgery should be resorted to.

Another principle is to aid the natural defenses and to encourage physiologic processes. Methods that will stimulate the circulation, reduce congestion, stimulate body activities all constitute rational treatment. In nearly every instance osteopathic technique will accomplish the best result in the safest manner. However, the osteopath must be able to use the best method in every instance. In emergency he must at times resort to sudden stimulation which may require the use of a drug. The question before him as a physician is to decide what the best method known for the particular condition confronting him. Osteopathy as a system must necessarily include any measure which will at any time be the best known treatment for any particular condition.

#### Summary:

1. Osteopathy should be considered as a system of healing.
2. Osteopathic technique consists in those therapeutic measures that have originated in the osteopathic profession and is only the most important part of osteopathic practice.
3. The physiologic activities of the body depend upon the activities of the individual cells taken collectively.
4. The conditions that determine cell activity are structure, nourishment and nerve energy.
5. Any agent which disturbs these conditions is a cause of disease.
6. All recovery from disease is brought about by a restoration of the conditions of health which in turn depends upon the action of the natural body defenses.
7. The treatment of disease resolves itself into an attempt to remove the cause and to aid the body defenses.
8. Although the discovery and cor-

rection of osteopathic lesions is the most important single factor in practice, the practice of osteopathy includes all measures which may be used to the best advantage in the diagnosis and treatment of all diseased conditions.

9. Since food and water are the only substances which can unite with cells or contain potential energy that can be utilized by the body, drugs have no place in the treatment of disease except for emergency use to obtain an immediate result.

### DR. HUGH CONKLIN TALKS TO THE A. S. O. STUDENTS TODAY

#### President of the A. O. A., Who Is Here on Visit, Talks on Osteopathy

Dr. Hugh Conklin of Battle Creek, Mich., president of the American Osteopathic Association, addressed the student body of the American School of Osteopathy in mass meeting this morning. His theme dwelt upon the things that are essential to success in life, and said:

"Success is not measured by dollars, but by the feeling at the end of the day or the end of the week that your mind is clear, and that you have followed the dictates of your conscience."

Osteopathy is the greatest science known to the world today, Dr. Conklin said, and he urged his hearers to practice osteopathy unadulterated.

"Practice osteopathy," he said; "talk osteopathy, and live osteopathy; do the things you believe in. Your success will be measured by just how much osteopathy you live, talk and practice."

Dr. Conklin mentioned many experiences to bear out his assertion why the osteopath should have implicit faith in his profession.

Dr. Teall, in introducing the speaker, referred to him as "one of the world's greatest osteopaths."—Kirkville Daily News.—April 30th.

### SCHOOL DAYS—"THE OLD BUGGY"

#### Osteopaths Secretly Wed Here April 23

#### Bride and Groom Announce Wedding Over the A. S. O. This Morning

Secret weddings are all the rage in Kirkville. Over at the A. S. O. this morning, the bride and groom, Mr. and Mrs. Lloyd Lane, announced their wedding which occurred here April

23rd, Father Cafferky of the Catholic Church officiating.

Following the announcement, of course, the students got out the old buggy and brought the bride and groom up town for the usual parade. The bride was formerly Miss Florence Webb, also a student at the A. S. O.

The groom brought out the cigars and candy and gave the student body the "treats."

Both bride and groom are members of the class of '23, and are popular among the student body.

They will be at home to their friends hereafter at 804 West Pierce street.—Kirkville Daily News, May 7.

### SOME EARLY HISTORY OF DOCTOR STILL

#### A. A. B. Caveness

(Of general interest to all is information concerning the early life of such a world-wide figure as is that of A. T. Still, the founder of Osteopathy, so the editor takes the liberty of publishing the following, written by A. A. B. Caveness, the author, who, as a citizen of Baldwin, speaks from actual knowledge. Mr. Caveness' letter was published in the Topeka (Kan.) Capitol of November 11th.—Ed.)

Whether "truth is stranger than fiction," it is certain the romances of truth exceed in interest those of fiction—to the extent that fact exceeds fancy. The real experience in life, and not the hypothetical, is the vital thing.

Of the notable people who attended the old settlers' reunion recently held at Baldwin, Kan., the most unique, interesting and conspicuous figure was Dr. Andrew Taylor Still, the father and founder of Osteopathy, builder and president of its first and twice expanded college.

In the earliest years of Baldwin history Dr. Still was an allopathic physician, with a practice from this point over a territory almost equal to that of a Methodist circuit rider of the period. His family, whence sprung, were not only the original successors to the aboriginals, but were original in character and mental quality. Eccentricity is often the accompaniment of superior power. But this accusation became trivial in considering the admittedly able men and women of the Still generations. Especially was Dr. A. T. Still a thinker. His thinking and observation led him to discredit drug treatment for human ills. This state of mind arrested conscience. He shrank from the responsibility of a course which seemed to him rather a menace than a boon to human life. In the college of

solitude he became a student again. Dreaming—such it seemed—succeeded the long rides over the prairies—and his patients fell into the care of the bookmen. Of course, it was not long until the deathless terror to mankind, the Wolf, nosed the situation—and stood at the door of the dreamer. But not to frighten from the track whereon started. With the repressive power of strong souls, his eyes were forward, nor begged sympathy. He had gotten into the small but illustrious company of the world's pathfinders—whose journey ends with death, or at the goal.

It is tradition that some neighbors, with complacent confidence in their own sanity, regarded Dr. Still with suspicion. And later, when the physician who had deliberately taken the vacation of hunger, and through the illumination of fasting was able to announce a new philosophy of healing, suspicion grew into exchanges of humor. The Pharisee winked at the Sadducee as the doctor passed by. The history of Folly numbers a thousand volumes to one of Wisdom. Had there been eyes to see the embryonic creation in the brain of Dr. Still, probably the world-famous institution which is now the pride of Kirksville, might have given Baldwin a prestige not surpassed by the splendid performance and promise of Baker Uni-

versity—which through serious errors and countless difficulties has at last climbed securely to the highway. But so it was, the victim of contumely, and the sanest man in the community disappeared from its inhospitable precincts, and with wife and children sought surcease of ignorance in a more kindly region, where he might work out his benefaction to the race.

How Dr. Still traveled the leagues to Kirksville would, if written, be a rare human document. But he did. And the progression from obscurity to fame. "The last infirmity of noble minds," leaves him the simple, great man that a very few perceived he was forty-five years ago.

Everybody knows what has occurred at Kirksville. In spite of the powerful trust of political doctors, the beneficence and influence of that development are rapidly growing to the size of the world. That Dr. Still remains to see it is a novelty in history. Though the instinct to slaughter genius and race saviors is not yet extinct, in the fact that for the hemlock and cross we have the milder substitutes of wormwood and gall, there is evidence of final disappearance.—Page 397, Autobiography of A. T. Still.

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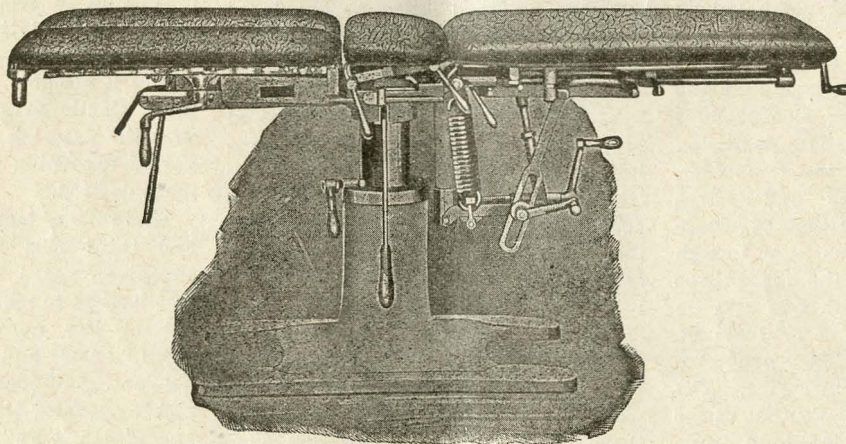
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## THE SECOND DORSAL

Address Before the New England Osteopathic Society, May 8, 1920

E. E. Tucker, D. O., New York

Not the least important among the lesions of the body is that of the second dorsal and ribs. There are several reasons why this lesion is important. One is its close relation with thyroid dystrophy. Another is its difficulty of correction—with reference here especially to the second ribs. A third is the difficulty of diagnosis. For although the spine of this bone is about the most prominent of all, yet it is also the most irregular as to form; while the second ribs are buried beneath the muscles and dense fascia of the shoulder blade, and expose a very small surface to the examining finger.

The second dorsal spine is a sort of ridge pole for the fascia and muscles of the neck and shoulders, and is therefore more likely to be warped as to form, and exposed as to strains. Its normal range of motion is very slight, which adds to its strength but adds also to the facility of producing lesion; for lesions are produced by exceeding the normal range of motion of a joint.

Strains on this joint come chiefly from strain on the arm, especially that of lifting, or carrying such things as heavy grips. Violin playing, piano playing and typewriting also produce a strain here, the latter less damaging in that it is even on the two sides, but producing lesions and warps nevertheless. The position of sleeping may produce lesions here, though less likely here than in the upper three cervicals. Leaning with one arm on a desk very frequently will do it. Contractures from colds often produce lesions of the upper ribs. The stooped position, especially that of the elderly, is likely to lead to a warp here with apex at the second dorsal. When the head is bent over in the position of reading in a deep chair or in bed, the chief strain comes here.

The relation of this segment to the thyroid gland was first pointed out by a case of Dr. Carpenter's, so far as I know. This was a case of exophthalmos, cured in one treatment by the correction of this lesion alone. The goitre returned and the lesions were found to have recurred; and was again corrected and again cured the condition; and a third time also this hap-

pened, establishing the specific relation of the lesion in that case at least. But in a score—yes, in fifty cases in my practice, the specific relation of this lesion to the thyroid gland has been proven to me at least.

Some of the disorders that come from thyroid dystrophy, and therefore from this lesion, are first those due to sub-oxidation; as liability to infections, hypothermia, somnolence, muscular weakness, mental inertia and nervousness, hypo secretion, intestinal sluggishness, adipose tissue, etc.

Those due to lymphatic engorgement: Glycosuria infiltration; lymphatic sluggishness and glandular enlargements; phlegmonous type of colds; liability to tonsillitis, appendicitis, serous inflammations, endocarditis, rheumatism, etc.

Those due to lack of cutaneous refinement: Dry, thick skin, baldness, alopecia (some of you may remember Dr. Still's insistence that baldness was curable through the second dorsal), poor teeth and brittle nails, paleness of skin and hair, etc.

Those due to vagus hypotonia: Gastric and intestinal indigestion, constipation, flatulence and meteorism, air hunger, etc.

Those due to softness of ligaments: A spine in which lesions are numerous, easily corrected and as easily recurring; flat feet, fallen arches, loose joints generally, visceroptosis, etc.

Those due to specific nerve reflexes from the direct strain on the thyroid nerves chief among which is brachial neuralgia and neuritis, the direct relation of which to dystrophia thyroidea has become clear to me in scores of cases; cervico-dynia, or crick-in-the-neck, some ocular phenomena, some laryngeal phenomena, and perhaps some gastric phenomena.

These are some of the reasons for the importance of this lesion, though by no means all.

As to the technic for these lesions, those of the second dorsal and ribs, the practitioner who has at his command the greatest number of different forms of technic is the one who will get the best results. There is no form that is uniformly successful; for the simple reason that the conformation of the bones and articular surfaces themselves vary in different persons and it is impossible as yet to determine what these variations are without dissecting the structures.

The old stand-bys are known to you all, though there may be some variations of them that have been devel-

oped differently by different men. As no two men see a landscape exactly alike, as shown by the different pictures they make of the same place, so no two men develop the same technic, and a comparison of one man's work with that of another man will often be of great value. That is the only reason for my undertaking to demonstrate technic on this or any other lesion before you.

Dr. Sartwell's technic you all no doubt know. It seems to be a successful variation of the standard technic for that area. The standard form is for the operator to stand behind the patient seated, place one thumb on the prominent side of the lesion, pressing toward normal, place the other hand on the vertex, turning the face slightly toward the side of lesion, pressing down, or "crowding," as it is called, on the bones of the neck; then carrying the head and neck to the side of the lesion, with an elastic thrust of both thumb and pressing hand.

In Dr. Sartwell's technic, the operator sits or stands on the side of the lesion, passes the arm under patient's chin, with forearm in contact with cheek and hand on vertex; otherwise same position as above, and same procedure. The support given to the head and neck in this technic adds to the confidence of the patient and enables him to relax more completely; while the limitation to the operator's arm movement from the position makes it possible to use a quicker and more elastic pressure and movement with the pressing hand, with less danger of exceeding the degree of movement desired.

There is a technic for the second and third ribs that has taken me seventeen years to develop which is worth more to me than any other. The patient lies across the table, face down, arms and legs relaxed and pendent. Supposing lesion is on right; operator lifts patient's left arm and places it under the shoulder parallel to the edge of the table, lying flat along; rotating shoulders to or near to the vertical. It is well to stand against the table close in front of upper shoulder, with patient's upper or free arm in front of thigh. Then pressing with left thumb against angle of ribs, he carries the head backward and to left so as to gap open articulations of right upper dorsals and ribs; then with quick elastic thrust releases and adjusts rib.

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