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*PROFESSIONAL COURTESY.

S. T. LYNE, D. O.

The term professional courtesy is used in this paper in the sense of its relation to our conduct, one toward another, as osteopathic physicians. And we hope to make plain the fact that certain discourteous practices among us are extremely detrimental to the progress of the profession.

An act of professional discourtesy may be not only injurious to the offended, but it frequently reacts with greater injury upon the offender. Furthermore, any discredit attached to an individual member, whether by his own act or that of another, reflects injury or discredit upon the profession. No member can be a law unto himself, without jeopardizing the welfare of his profession; he is under obligations that he can neither repudiate nor lay aside, if he would uphold the dignity and advance the interests of his calling.

The general public can not be expected to respect a profession beyond the degree of professional regard accorded one member by another; nor will it exercise any greater degree of confidence in the integrity and ability of members of a profession, than is manifested by the members in each other. It therefore behooves us to see to it that we attain that degree of professional courtesy, and confidence in each other, that will inspire the utmost respect and confidence on the part of the public, to the end that we may occupy the high position professionally, that is vouchsafed to us by the great possibilities of our beloved science. While osteopathy has made most remarkable progress in research and achievement, the dignity of the profession is not all that it should be. Bickerings, petty jealousies and various discourteous practices, that bring into question the ethics of the profession, are still manifest in our ranks.

The basis of professional courtesy naturally rests upon certain well established ethical principles. And although these subjects are formulated and promulgated in the code of ethics adopted by the American

*Read before the Missouri Osteopathic Association.

Osteopathic Association at its St. Louis convention, there are perhaps several thousand members of our profession who have never read this code. Even among the members of the American Osteopathic Association, all of whom have had a copy of the code placed in their hands, there are some who seem to be uninformed on very important questions that are specifically explained in the code. Can it be possible, that, among those who have had an opportunity to inform themselves, there are some who are too arrogant or indifferent to give the matter consideration?

A lack of the courtesy or consideration due one member of the profession by another is excused by some on the grounds that the schools have been derelict in bringing such matters to the attention of the students. While it would no doubt be time well spent, if the schools, by a course of lectures, would thoroughly instill into the students the ethical principles formulated in the code, this of itself would eradicate the evils as they exist to-day. Practitioners new in the field are very apt, and in some instances almost compelled, to adopt the methods or follow the examples of the older or established practitioners.

We have had before us, now for nearly two years, an excellent code of ethics, bearing the insignia of approval of the organization that represents the head of our profession, and there is no longer any excuse for ignorance on this important subject.

The American Osteopathic Association does not seek to make any member of the profession subservient to the code against his wishes. Nevertheless, the code enunciates well defined principles for the government of professional conduct, without a thorough knowledge of which no osteopathic physician is properly educated or equipped; nor can he violate the recommendations of the code without disregarding the welfare of the profession.

While due allowance should always be made for exaggeration in hearsay reports, we think there is sufficient evidence of unfair dealing among us to justify the conclusion that professional discourtesy is the most deadly viper gnawing at the vitals of osteopathy.

The instances we shall allude to are not only void of personality, but represent a collection of the observations and experiences of various practitioners, and serve in a measure to indicate some of the reforms most needed for the promotion of professional etiquette and harmony.

In the matter of consultation, an instance is reported wherein the consultant delivered his opinions and prognostications in the presence of the physician in charge without previous conference and concurrence. In another case the consultant examined the patient, made statements to the family relative to the treatment that should be employed, and

departed before the arrival of the attending physician. Indeed there are numerous instances wherein the physician in charge was totally ignored, as though he had nothing to do with the case, and was not entitled to any respect or consideration. Such conduct is in total disregard of the most remote semblance of professional courtesy.

Numerous instances could be cited wherein an osteopath was visited by, or was called in to see, a patient who was under the care of another. Physician number two not only accepted the case, knowing that physician number one had not relinquished it nor been properly dismissed, but made statements reflecting upon the ability of his predecessor, and proved himself unable to benefit the patient.

Again, an attending physician being out of town or otherwise unable to attend to his practice, or the patient away from home, an emergency frequently arises requiring the services of another physician. Calling in another physician, in such emergency, may be even at the suggestion of the physician in charge. It is to be regretted that under such circumstances there are some among us who seem to delight in telling the patient something about his case different from what has been told him by physician number one. He may be told of a lesion that physician number one had not thought to mention, or perhaps considered foreign to the disease. Or, knowingly and without any occasion or necessity, an entirely different diagnosis is made. In other words, instead of seeking to justify the course of physician number one, as far as consistent with truth and probity, at the same time treating the patient according to indications, he seeks to impress the patient with the idea that the knowledge and skill of physician number two is superior to that of physician number one. This variety of discourteous conduct not only tends to confuse the mind of the patient and to lessen his confidence in osteopathy, but its effect on one's practice is so baneful that the majority of us seem unwilling to permit our patients to be treated by another osteopath. We are even prone to permit a patient to suffer for want of treatment, or to have our practice go to waste for a time, rather than trust a fellow-practitioner in charge.

The code of ethics admonishes us, that, in social or business intercourse with the patient of another physician, the topics of conversation should be as foreign to the case as circumstances will admit. Yet, there are various instances wherein a member of the profession has been known to question a patient of another as to the nature of the disease or the treatment employed; even expressing an opinion of the case, and presuming to say that he ought to be cured in three or four treatments. "Talking shop" to the patient of another physician is not only very bad form, but it occasions remarks that may reflect upon the physician in charge, even though not so intended.

It is not uncommon for a patient to be told by a friend, that a certain osteopath, who has been informed by this friend that the patient is being treated every day, says it is entirely too often, and is harmful to the patient. If treated only once per week, it is not often enough; if he is being treated thirty minutes, it is too long; if only ten minutes, it is not long enough. All this without seeing the case or knowing anything about the condition, except from hearsay. Through a friend, also, patients who are easily discouraged or dissatisfied, are often "snitched" with the knowledge and consent of a physician who promises quicker results and lower prices.

This brings us to a question that causes no little trouble and ill-feeling—charges for professional services.

The new osteopath in the field often finds to his sorrow that some of the older ones are secretly "cutting prices," and perhaps are worked "overtime" by a "cheap practice." What is the new beginner to do under the circumstances, treat at the reduced price, or perhaps do nothing for a time? He who decides to uphold the dignity of the profession by adhering to the regular charges is not only entitled to much commendation, but in time will reap the fruits of his reward. The practitioner whose spirit of commercialism has compromised him in the esteem of his profession, will find, sooner or later, that the very patrons who were amply able to pay the regular fee, but to whom he made a "confidential price" of one dollar for fear he would lose them if he asked two dollars, are becoming educated to the fact that "cheap prices" means "cheap osteopathy," and are gradually leaving him for one who represents a higher standard in the profession. True, there are circumstances warranting a reduction in price, but the patient who should pay two dollars and pays only one, does not accept such a reduction on the grounds that he is unable to pay more.

Reducing prices arbitrarily, especially when there are other osteopaths in the field, and when the circumstances of the patient do not absolutely require it, not only manifests a disposition to take undue advantage of those who desire to maintain a high professional standard, but it is a brand of commercialism that is becoming very apparent to the public, with a tendency to depreciate confidence in the science of osteopathy.

There exists in some degree among the laity an impression that female patients should be treated by women and male patients by men. Recent manifestations imply, that in some instances at least, this question, in a degree, has even become a matter of open controversy between the two sexes in our profession. The impression referred to has no right to exist, and the responsibility for correcting it rests equally upon both sexes in our profession.

The female portion of our profession no doubt has heard it variously intimated that women are not supposed to be strong enough to treat men, and that it is indelicate for them to do so.

The proper application of osteopathy depends much more upon skill than strength. If in some isolated case a female osteopath has not sufficient strength, she is the first, and perhaps the only one who is aware of the fact, and her interest in the case would certainly induce her to obtain all the strength needed, by the use of either animate or inanimate means. We furthermore take the position, that, while a question of indelicacy might be involved in the ordinary massaging of a man by a woman, or a woman by a man, there is absolutely no just grounds for the impression that it is indelicate for a female physician to treat a male patient osteopathically; nor for a female patient to be treated by a male physician. With reference to the latter, it is well known that the majority of women who have occasion to be attended by a medical physician or surgeon make no such distinction in that profession, though frequently subjected to methods of treatment that are much more indelicate and repugnant than any that are practiced in osteopathy.

We are not taught these distinctions in school. Both sexes are given the same course of study and instruction, and are supposed to have like qualifications for osteopathic work, regardless of the sex of either the physician or the patient.

While the sex distinction idea, in a large measure, is doubtless due to selfishness, jealousy and the like, among us, the effect that it may have on the practice of an individual, or a class, is not the important question involved, but rather the effect it has on the professional status of osteopathy.

The public mind is more or less confused as to the relation between osteopathy and massage, and the question, whether we are to be classed as masseurs or physicians, is with us to decide. To permit the impression to go uncorrected, that men should be attended by males and women by females, tends to confirm an erroneous idea, and to level the osteopath to the plane of a masseur.

The importance of the hour demands that we eliminate the sex question, in order that we may be a dignified and unified body of physicians. In osteopathy it should be as in medicine and surgery, not a question of sexes, but a question of physician and patient, only.

It is perhaps true that many of the little discourtesies shown one member by another are unintentional and due to thoughtlessness, but this is not excusable, for we should ever have in mind and practice the ethical precepts and examples essential to the conduct of a well finished and dignified physician.

In osteopathy there is sufficient honor and emolument for us all and it is high time that we get into a closer bond of unison, adjust our differences, lay aside all contention, selfishness, jealousy, backbiting and other varieties of injustice, and proclaim to the world by our conduct, one toward another, that peace and good fellowship prevail among us.

No means is perhaps so productive of good results in fraternizing our profession, as organization and thorough familiarity with ethical questions. Organization furnishes the opportunity for professional sociability, and for unifying and harmonizing our purposes for the advancement of osteopathy. Familiarity with ethical questions not only teaches us the courtesies and considerations due each other, but tends to adorn us with the honor and refinement that should characterize all professional men and women.

We are engaged in a high and noble calling as benefactors of suffering humanity. Surely this should be a sufficient incentive to induce us to cultivate and attain a true fraternal spirit; a fraternal spirit that will elevate us to a higher plane of unselfishness, that will constrain us to at least remain silent, if we can not conscientiously commend an associate in a common cause. Then, and not till then, will the public entertain for us that high professional regard so essential to the progress and full attainments of the science we represent.

Kansas City, Mo.

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THE CAUSES AND PREVENTION OF DISEASE.

F. J. FEIDLER, D. O.

This lecture is written in answer to a request from the Seattle Commercial College for instructions how best to preserve health. "An ounce of prevention is better than a pound of cure." Knowing the causes of disease it should be easy to keep well.

Disease is the result of some obstruction to the normal working of human mechanism, and the prime cause of such obstruction always is some accident, twist, strain, exposure, fatigue; uncleanliness, unhygienic living; extremes or sudden changes of temperature; draughts; improper use or abuse of drugs, food, clothing; habits, posture, sleep, exercise; impure light, air, water or food.

Any one or combination of these will gradually weaken the system, making it more susceptible and with less resisting power, until some additional, exciting, cause, like a "fresh cold" will precipitate a serious disease, that may even lead to the grave.

If a person who is perspiring goes into a street car, he will probably raise the window and delight in the cool breeze; yet that is about the

worst thing that he could do. In a few hours or the next day his neck will be so stiff that he can hardly move it. The muscles are contracted, pressing on the nerves and blood vessels in the immediate neighborhood, and obstructing the flow of blood on its way to, or from, some distant organ; not only causing local pain by squeezing the nerves, but also preventing them from regulating the blood, controlling motion, sensation, and nutrition to some distant organ. That organ may be the eye. While this pressure remains the eye is becoming weaker and weaker for want of proper nourishment. If this pressure on the nerves or blood vessels is removed, they resume their normal active duties and soon repair the weakened parts. But should the constriction on the nerves and blood vessels in the neck remain for some time, the impoverished eyes may become so weakened that another cold, or some indiscretion, reading in a poor light, for instance, will aggravate the original trouble and may precipitate some incurable disease of the eye, or even may finally produce total blindness.

Pouring atrophine, or other eye waters, into the eye, would not remove the pressure on the nerves, therefore could not cure. By the way, this very condition is frequent, if your eyes are painful or sore, see if there is not a decided tenderness back of the neck, close up to the skull, or deep under the ear, more on one side than on the other. If there is such tenderness, you will not get much relief from glasses, but if you can remove the constriction from the blood vessels and nerves, the headache, or eyeache, will disappear. In simple cases, sometimes, the muscles can be relaxed by simply using hot applications back of the neck, frequently renewed, for an hour or more. Care being taken that you do not "catch another cold" afterwards. Treat every evening. If this treatment does not give relief in a few days, you had better see an osteopath.

The writer has a bad habit, a very bad habit, he likes to eat; he thoroughly enjoys eating; he eats too much, often twice as much as he ought to, the result being the overloaded bowels are overworked and become weak, in fact, for the same reason the entire body becomes weaker. I get tired easily, a short walk makes me "puff" for breath, I easily perspire, and when I work a little harder than usual, I am sure to catch a cold, which, of course, attacks the place of least resistance, the weakest point, the stomach, resulting in vomiting and diarrhoea, and the only way I can get relief is to eat absolutely nothing for at least four days, which is quite a punishment. After an experience of this kind I become cautious and eat slowly, masticate thoroughly, and only a moderate amount of substantial, nourishing food, and with a treatment or two from a competent osteopath soon feel good again. But, alas, I gradual-

ly get into the the old habit again, salads, pies and other indigestible dainties are indulged in and again the weakness begins, culminating in another spell. Take warning.

Now my wife is not a glutton like myself; she eats moderately, though ices, meringues and candies are hardly muscle building foods, still she gets colds and neuralgic pains, just the same. She dresses warmly with wraps and furs enough to withstand the rigors of the arctic, but, alas, she is proud of her little feet, and wears the daintiest, thinnest shoes, with soles as thin as tissue paper, and toes so pointed that I wonder what becomes of the other toes after she gets her little toes into the shoes. Her feet are like ice, the blood cannot circulate, the thin soles are worse than nothing at all, of course she has a constant cold keeping her general system weak, with no reserve power to resist any additional attack, therefore when she goes out of a warm kitchen to talk to some peddler in the cool draft of a half open door, the cold becomes aggravated into a darting neuralgia, and she is unable to wear her dainty shoes, or go shopping for a week, during which time she is trying to allay the pains with hot foot baths and steam baths, to say nothing of the necessary osteopathic manipulations. Are you wise enough to heed this warning? Tight corsets are worse than tight shoes. Cigarette smoking is more debilitating than either. Too much emphasis cannot be given to the danger that lurks in these neglected, little weakening causes of disease. Without some previous weakening of the body no serious disease can occur.

Then children are exposed to scarlet fever, one contracts the disease, the other nine do not. Why? Because one was already weakened, the others were not. Ten boys climb into an orchard and all eat unripe apples, one gets colic, the others do not. Why? Because one's stomach was already weakened, the others were not. The ones that became sick had not enough resisting power.

The little twists and falls of childhood often result in a permanent pressure on a nerve, or blood vessel, that may be overlooked at the time, but will gradually weaken some part, until an extra hard game of ball, or something makes him too weak to resist the virus of diphtheria, that is in the neighborhood.

Children's complaints of hurts should not be lightly passed by; the cause should be sought for and corrected. It seems scarcely necessary to speak of uncleanness, or unhygienic conditions, everybody knows they will develop the germs of malaria, typhoid, etc. Still I will remark that washing the face once each day is not sufficient to keep the body clean. The bath tub must be put into service not less than once or twice each week, just before retiring is the best time, care being taken to finish with a brisk dry rubbing to avoid catching a cold.

Sweeping the middle of the floor daily and cleaning house once in six months only, is a sure way to start a smallpox camp. Every corner of the house from cellar to garret, as well as the back yard, should be searched at least once each week, for any crumbs of decaying matter, which should be burned at once. Carpets should be moveable, like rugs. Rotten vegetables in the cellar are great microbe breeders. Sewerage, of course, must be perfect.

If there is any contagious disease in the neighborhood, do a thorough housecleaning, at once, using sunshine and disinfectants freely, and be sure that there is no undermining weakness in your own body, constipation, for instance.

Young folks, generally, are very thoughtless, and the young men, particularly, are not considerate of the health of their lady friends. Evening toilets are so flimsy and scant that, with the very best care, a cold is very likely to be developed after an evening of social pleasure. This danger is made a certainty if the parties leave the rooms after a warm dance or other exercises.

Do not permit yourself to perspire at these functions, and always rest awhile, until any unusual warmth of the body has subsided, before going outdoors.

Saying that delightful, oft repeated "good-night" in the half open door has been the seed of many a case of consumption. Sitting on cool steps has made a lifelong invalid of many a thoughtless woman. Avoid it as you would a pestilence.

If your feet are cold it is a sign of obstructed circulation somewhere, and may accompany headaches, constipation, and many other troubles, you had better consult an osteopath soon; in the meantime take hot foot baths as high as the knees, put your feet in the oven, or in some other way get your feet very thoroughly warm as soon as possible. By the way, this is one of the best ways to cure a cold in the head, if done in time. Never go to bed with cold feet, if necessary take a hot water bag to bed with you. Improper clothing is the cause of many diseases. High heeled shoes throw the body forward, and may cause spinal curvature, or neurasthenia.

High stiff collars impede blood circulation, resulting in headache, earache, weak eyes, dizziness, insomnia, and any of the throat troubles. Goitres often are the result of stiff collars obstructing blood circulation by pressure upon the arteries and veins of the neck.

The damage done by corsets is incalculable, it is a blessing that their use is being discarded by all except the giddy women. Women should wear sufficient warm underclothing, next to the skin, the loose skirts are poor protection against the changeable weather.

Men's clothing is much more sensible, still I wish to emphasize the necessity of thick soles for your shoes. Wet feet after a day of fishing may end in rheumatism. Pernicious habits in time will undermine the health. Smoking cigarettes is extremely debilitating, and has made many young men opium fiends. Smoking cigars has produced cancer of the tongue frequently. President Grant died from a cancer of the tongue caused by excessive smoking.

Habitual incorrect posture may cause other diseases as well as humpback. You should take advantage of every opportunity to offset, and correct, any tendency to round shoulders or narrow chests, by walking erect with chest expanded, shoulders and head thrown back, and breathing deeply, through the nose. Pure fresh air is plentiful and cheap, yet people neglect to avail themselves of this fact; instead of airing rooms properly, they not only pollute the air of the rooms with the poison laden breath from their lungs, but make matters still worse with tobacco smoke, late lunches, etc., to say nothing of housing too many people in small rooms.

You would think it suicidal to drink water from a sewer, yet sewerage is crystal clean in comparison to the vitiated atmosphere of the average sleeping room, and is far less dangerous to health.

A person rebreathing his own breath in a limited space will soon die; as soon as half the oxygen of the air is converted into the poisonous carbonic acid gas. 1000 cubic feet of air for each person will be unhealthy in 6 hours, unless replenished, and cause headaches, nausea, etc.

Too much stress cannot be put upon the importance of pure air and deep breathing.

Bed rooms should be sunny, and be constructed so that the bed will be out of the draft from the open window. To occupy, or work in, a room during the day and sleep in it at night will surely end in consumption.

A certain amount of open air exercise is necessary to preserve health. There is no single exercise equal to brisk walking. Live ten to twenty blocks from your work and briskly walk the distance in all weathers.

Since the writer is an osteopath, it may appear prejudicial to warn you against the use of drugs, still duty compels me to quote the old saying of "Throw physic to the dogs" if you have a grudge against the dog. Seattle, Wash.

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DIET IN CONJUNCTION WITH OSTEOPATHY.

E. A. MONTAGUE, D. O.

Diet—too often overlooked, is an inexhaustable subject and I wish to give only a few hints. While we osteopaths go to the spine and make an effort to remove the primary cause of disease, it is well to prescribe

a food suited to the case in hand. While working to remove the real cause along the spine, a proper diet will some times work wonders by aiding to eliminate the secondary cause. Some of our profession say: "Remove the primary lesion and the secondary matters will take care of themselves." According to my observation the exciting cause plays a large part and should be looked after as diligently as the spinal lesion.

Foods are composed of chemical elements for the upbuilding of body tissue and the normal individual has the certain chemical compounds found in food, water and air. On the other hand he with the deranged system must have the chemical elements selected with the view to his needs.

In order to determine what such a diet should consist of, we should study the value of the different classes of food in force production and tissue building. The main elements which enter into tissue building in the body are: chlorin, sulphur, phosphorus, iron, sodium, potassium, calcium and magnesium in different combinations. Bone tissue for example contains about 50 per cent of lime phosphate. If this substance is deficient in young and growing children, the bones are poorly developed and so soft that they yield to strains and become bent and out of shape. This constitutes one of the principal symptoms of rickets. Lack of iron in the food impoverishes the coloring matter of the red blood corpuscles on which they depend for power to carry oxygen to the tissues and anæmia results. The lack of sufficient potash salts is a factor in producing scurvy. A diet of salt meat with absence of fresh green vegetables or fruit may cause it. The lack of sodium chloride interferes with many functions of the body,—such as absorption (osmosis) secretion, digestion, assimilation, etc. In chronic cystitis food of a chemical property that would lessen the acidity of the urine should be given. The proper diet for advanced heart disease deserves careful consideration, for on it depends the patient's comfort as well as prolongation of life. We have a great many secondary symptoms in the above disease. In valvular disease of the heart: we have obstructed venous circulation resulting in local engorgement of the abdominal viscera, producing intestinal catarrh and other digestive disorders. When palpitation, dyspnoea etc., develop it is best to give small amounts of food or withhold it for a time altogether and by no means should fats, sugars and starches be allowed; owing to their tendency to produce flatulency which aggravates the above symptoms. The different ingredients in food which are brought to the liver via portal the system should be in concordance with the condition of that organ, if the liver is congested from the many diseases it is heir to, it would be well to give foods that are easily assimilated and devoid of starches and sugar. In my experience in treating asthma I find

that diet is quite an important factor. I first locate and treat the bony, muscular, and ligamentous lesions. The next step I prescribe a suitable diet. Accumulation of large quantities of undigested and fermenting food in the stomach and intestines causes them to become distended by gas the pressure interfering with the normal movements of the diaphragm and abdominal muscles in free respiration. Most cases of this disease can be traced to some unsuitable article of food as the exciting cause for paroxysms.

All elements of food play a part in disease and properly prescribed diet in quality and quantity has a good effect.

I believe that a majority of patients suffering of chronic ailments are inclined to overeat more than the system is able to assimilate properly.

If they have some chronic digestive disorder the digestive fluids are impaired by over work, consequently their food should be carefully selected.

Eureka, Calif.

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BODILY POISE.

DR. FLORENCE COVEY.

The all-wise Creator has fashioned man in such a form that that an erect carriage of body ought to be one of his most prominent characteristics. One of the most reliable methods of testing one's ability to measure up to the standard of erectness is to take a position adjacent to any flat and upright object, such as a door or wall, shoulders well back, and touching the heels, the sacrum or lower portion of the spine, and the back of the head.

Erect carriage is one of the very strongest points of differentiation between man and the lower animals. It is a mark of manliness and courage, a stamp of self-respect and fortitude. Of the numerous advantages of a proper poise let us consider some of the most important.

We cannot see ourselves as others see us, nevertheless, all of us realize that appearance is of prime importance, especially, to people in public life, for surely, "Man looketh on the outward appearance." The mein of an individual is a stamp of his character; and as we ought to aspire to a high standard of morality, so should we keep in mind the normal poise of the body. We have known many a good man, to have achieved success, even to greatness, humpbacked and absolutely unable to straighten up; but when we behold such, we must think, as the multitude say, "Appearances are against him."

Correct poise carries with it a sense of dignity unequalled by any other physical attainment. We are naturally attracted by the erect individual, while, the man or woman with round shoulders and hollow

chest, we generally pass by with only a sentiment of pity, unless perchance it be one to whom particular deference is due from us. We never witness a body of military men without being impressed with a feeling of awe: On the other hand, classes of men and women from our colleges have passed before us, many of whom have made our hearts ache, on account of their distorted bodies.

We have a higher degree of self-respect when we possess an erect figure. Pride, we believe, often to be a virtue, especially is it so, when it induces one to stand or sit properly. We almost cease to reverence ourselves, even, when we are neglectful or slothful toward the attainment of the standard set for us by custom or the laws of health.

The erect person has the more prosperous aspect, and really seems to draw good fortune to himself. This condition appears to be one of the inevitables: Just as the magnet attracts the steel rod, so does this natural charm seem to draw to itself good fortune.

A proper carriage of body, further, tends to a disposition to take the hopeful view of life, to a belief that the ordering of things in the universe is such as to produce the highest good. We recall with pleasure the hours spent with Ermine Owen in her elocution class, in which she insisted on us keeping the chest ahead of the abdomen during physical exercises. Now, we appreciate that our kind teacher's energy was expended in preparing us to ultimately live on the "sunny side of life."

We regret that many things wished for are not satisfying when possessed. In so many instances has this proven true, that we have the adage, "Anticipation is greater than realization." The realization of a good figure is not of this class, not, indeed, that it gives one a sense of egotism, but rather a feeling of satisfaction. In many cases an erect posture is reached after months and years of effort,—an example of the time honored truth, that the greatest rewards come from the most strenuous application.

Erect carriage is an economizer of energy. Many a noble aspiration never materializes, for the reason that the aspirant lacks sufficient strength. When standing or sitting correctly poised, each muscle is doing more nearly its part in the support of the body; every bone is accomplishing more nearly its normal function, and every ligament is giving a helping hand; bodily energy is saved, and thus the erect individual is enabled to approximate more nearly the high ideals to which he aspires, not being dragged down by the weight of a body bending forward toward the ground.

In view of its acquirement and maintenance, desire for a carriage such as our Creator planned must be uppermost in our hearts and minds. A whole-souled craving for a condition is strongest stimulus to its attain-

ment. Abraham Lincoln had a longing for knowledge, and it ultimately placed him among the most illustrious men of the past; and thus it is, back of all of the greatest deeds of history has been the soul-possessing desire for some definite purpose.

It is impossible to stand erectly, unless the muscles have a sufficient amount of strength. An erect posture manifests power possessed, so an organ acquires strength by continued use; hence, it is important that we always endeavor to keep in use those muscles which are intended to hold our frames in an upright position.

Physical culture is so widely known at the present time, that all who so desire may embrace its practice. This should be regarded as one of the most important departments in our colleges, and especially those for women, as bad poise is undoubtedly the cause of many diseases peculiar to the sex. Dr. Charles Hazzard, in his "Principles of Osteopathy," asserts that appendicitis is caused by a dropping of the eleventh and twelfth ribs from their normal position. Improper costumes of dress, such as corsets, keep women from standing erectly. The writer had a case of ulcer of the stomach. She happened to enter the dressing room as the patient was adjusting her corset, which appeared to be very close. An attempt was made to insert the hand between body and the corset; but it was out of the question. This case had a bad poise, and who could wonder? The writer explained to the patient the absurdity of compressing the stomach with the other vital organs into so restricted a space, entirely contrary to Nature's intention, and then having to employ an osteopath to restore the normal functions of those much abused organs.

A friend tells you that your carriage is bad, and possibly you straighten up in a measure; but it is more probable that you think it of little consequence and the advice goes unheeded. When, indeed, one's physician says, "You must stand up straight if you want a healthy body," it carries some weight, especially when the patient comes to understand what no previous physician has ever explained, namely: that he will be assisting Nature and the doctor, and moreover saving his money, and to a considerable extent warding off disease.

The unbalance of some begins at the waist line. This condition compresses the stomach, crowds the diaphragm, and further effects the blood and nerve supply to the pelvic organs and kidneys.

Another form of stoop is found in the upper dorsal region of the spine. This form effects the nerve supply to the lungs. This condition approximates the vertebræ, lessens the intervertebral foramina through which the blood supplying the cord passes. It is easy to see that the amount would be lessened, having smaller space through which to pass;

hence, the spinal cord, not receiving sufficient nourishment, fails to send from its anterior gray columns proper impulses to support the nerves to the lungs, the starved lungs are a ready prey to pneumonia and tuberculosis. The fact that the majority of the deaths among the people of Maine are from these two formidable diseases behooves the physicians of this state to dedicate their best energies to teaching these most excellent people the important facts in relation to their bodies.

We may recall instances in which a crowded pair of lungs do not succumb to disease; but in such cases, Nature has been a steadfast friend, and we shall never know how much stronger these unfortunate individuals might have been had their lungs occupied their normal space.

A bad poise of the body results in a dropping of the clavicle and upper ribs. This interferes with the circulation to the brain, and that organ becomes sluggish and finally diseased. The brain is supplied with blood from the internal carotids and vertebral arteries. The first of which are formed by a bifurcation of the common carotids, which spring primarily from beneath the sternal ends of the first and second ribs and the sterno-clavicular joints, on either side of the body. They pass upward in front of the transverse processes of the upper three or four cervical vertebræ, in the petrous portion of the temporal bone, and continue to the brain. The second, the vertebral arteries, wind their way through the transverse processes of the cervical vertebræ. Beginning with the sixth cervical they run backward behind the articular process of the atlas, the first bone of the spine, over the upper surface, entering at the base of the cranial cavity through the foramen magnum. We may readily see how a drooping head and neck would impinge upon both of these pairs of arteries and interfere with their functions.

Further than this, the arterial supply to the scalp comes through the external carotids which are the other terminal branches of the common carotids, and a dropping of the clavicle (collar bone) and the first and second ribs, as a result of stooping, retard the function of the common carotids, and later its branches, the external carotids; thus the scalp being poorly supplied with blood, it affects the growth of the hair, which, if abundant, is indeed a crowning glory, especially to woman.

Nature has supplied a number of safeguards for the protection of the spinal cord, namely: The free mobility of the spinal column as a whole; the slight amount of movement between any two vertebræ; the elastic intervertebral discs which break up the force and shock applied to the spinal column; the comparative large size of the spinal canal in the cervical and lumbar regions, where the mobility is most marked; the normal curves of the spinal column, which lessen shock and force; and the dura mater, one of the coverings of the cord, which is so tough that the cord may be ruptured without laceration of the dura.

These provisions not only protect the cord but also render the spine itself stronger and less liable to injury. Nature has in this instance as in every other, performed well her part; and yet weakened conditions of the spine and other parts of the anatomy exist, causing many and varied troubles and diseases.

To what must we look for corrective measures as to these before mentioned abnormalities? They, surely, will not correct themselves, and the sufferer unaided can accomplish much in the direction of recovery, especially if the condition is not too long standing; but his would often, indeed be a hopeless case were it not for the science of osteopathy that comes with its corrective methods of treatment to the rescue, so that weakened humanity may come to possess strength and energy sufficient to maintain a proper poise of body, and thus assisting nature, approximate the divinely intended health. Who, except an osteopath, will exert himself to explain these practical points for the benefit of afflicted humanity? The appeal comes to the members of our profession to carry on the good work, advancing the eternal principles promulgated by our wise and venerated founder, Dr. Andrew Taylor Still.

Portland, Maine.

The Greatest State Meeting Ever Held in the Annals of Osteopathy.

Let us in beginning pay a warm tribute to the officers of the Missouri State Osteopathic Association for the splendid, strong, intensely interesting programme they arranged for their seventh annual meeting.

With this meeting must always be associated the honor; that at this time the first surgical hospital was dedicated. As Dr. Hildreth said, "This hospital marks an epoch in the history of osteopathy." It is the serious undertaking of making surgeons of our students which we have before us, and not one of us underestimate the responsibility.

"Do not think we are 'going to seed' on surgery or that we are 'going it blind' said Dr. Chas. E. Still." We believe that 90% of the the surgery done is unnecessary and that is the position we will take in teaching and in practice."

The practice of surgery in osteopathy

will be conservative, of that we can all rest assured; at least so far as the American School of Osteopathy is concerned.

Dr. Teall asked "who shall practice surgery and who shall not?" "Only the man carefully trained in the laboratory, in the hospital, at the table in technic, he must be the specialist in surgery and not a general practitioner."

Surgery is now a part of the osteopaths training, it always has been in theory, lately in practice under adverse circumstances, this modern surgical hospital of the A. S. O. this thing of beauty makes it at least possible to teach and practice surgery under the most favorable conditions.

But there it stands a monument to our advancement, we all appreciate that our task is a great one, and we enter in upon it with becoming modesty. The future will we think bear us out in the assertion.

That we knew our responsibility, and time will prove us all equal to the occasion and more enthusiastic state meeting it has never been our pleasure to attend. Everybody was there to learn, everybody was in a great good humor, never a more brilliant gathering, never a more smiling one.

It was the great bond of the love feast on every side. We got started right, yes, with a prayer, but there are all kinds of prayers, this one was from the full heart, that asked for guidance and strength that we might do our work here, better, more scientifically, asked that we might be made better men and women better physicians.

Then we looked around every seat in the big hall taken. 150 delegates at a state meeting and 400 students. Yes, Illinois and Iowa were there too, and Dr. Teall, all the way from Brooklyn. Mrs. A. E. Conger from everywhere and Dr. Bunting, our news gatherer, and we want right here to exact the promise that they will be with us next year. We need them!

When Dr. Dobson pulled his smile of welcome on us, it was a big one, it had to be big, it was a great crowd. We all smiled back and settled down in our seats with the supreme satisfaction that comes, when we know of a thing well done and we could not help but foresee that this meeting was destined to be a success. So when Dr. Arthur Hildreth got up to answer for all of us you could see him rise to the occasion; of course he was handicapped. Charlie had warned him early, "Now Arthur remember, I don't want you to talk too much because I want to do a lot myself," but Arthur told them what we thought of their welcome, so much better than we could do it ourselves, that we felt grateful to him. Yes, we got started right; all through our two days and two nights of downright hard, energetic work not one of us complained. What a beautiful idea, how thoughtful it was of the State Normal to send us the Gavel, it was the

right hand of fellowship extended by one great educational institution to another and at the physiological moment. Whenever the Gavel fell, you could feel us all grasping hands and wishing each other:— Success!

Then came the Old Doctor. You who see him always, can't imagine what his coming means to us, who see him but once each year, perhaps only once in two or even three years.

For an instant your heart stands still, everything stands still, excepting your eyes and mind, and then a gasp of relief. "Yes here is the Old Doctor," and here he comes with his long staff, and you thank God that he is well again. Isn't this your innermost thought laid bare. Well then, let's say it.

We are back home now and we wonder what made this meeting so different from all others. It was, the good fellowship, the meeting of old friends, the knowledge that the Old Doctor had survived his illness, the mental storms, the griefs, that have been his in the past year, and we were glad.

We missed Dr. Miller of Iowa and Dr. Fryette of Illinois on the program, but in another moment, Dr. Lyne of Kansas City was stirring us to the very depths with his remarks on "Professional Courtesy." He discussed broadly the relationship that should exist between osteopaths and doctors of other schools. It was not an optimistic view of our ethical attitude to each other, it could not be, he was discussing an evil, i. e., the lack of courtesy. And while Dr. Cornelius, who followed him in discussion agreed in the main, he pointed out, that we do get a great deal of consideration from other schools of practice and that nothing is gained by the want of professional courtesy among ourselves. The remedy lies with the individual. * * * * *

Just think of the student practitioner, so impassioned as to pursue with patience never ending, a single study for eleven years, can't you see that high forehead

bending over dissection after dissection, hour after hour, day after day, year in and year out, and then have him come before you and in that modest little way of his hold out to you in one volume, the work of all these years and ask, "Does it meet with your approval?" How could we disapprove a work so great.

These studies of Dr. A. Still Craig, "Anatomy Applied" places an imperative demand upon us, we cannot discourage original research along any line of value to osteopathy and these dissections so highly creditable must and will have a financial support.

As an aid to diagnosis and treatment these cross-sections of the human body are of incalculable value.

Dr. Craig's paper was one of the distinct sensations of the meeting, the students of the A. S. O. were especially impressed, for they realized that even the busy doctor has time for original research if he feels so inclined. To the older practitioners it was a stimulus to renewed effort. How puny have our efforts been in comparison, after all.

Dr. S. W. Longan's paper, "The Blood in Health and Disease," was given to us, with the discussion first, this has its disadvantages.

The discussion of Drs. King and Hoffman both practical pleas for a more earnest consideration of blood examinations were clouded somewhat by Dr. Longan's more theoretical treatment of the subject. A criticism that might here be made is in the nature of a plea for brevity, deal quickly and trenchantly with the subject under discussion. Let prefaces be omitted entirely, give us the kernel, the meat of the subject.

Dr. H. F. Goetz read a preliminary report on "The Graphical representation of Spinal Curvatures using for this purpose an apparatus of new design and called by him a Pantograph. A better name suggested by Dr. Craig, "Spineograph" will be adopted.

This mechanical device makes a draw-

ing of all curvatures of the spine at the same time. Its value is claimed to be in the accuracy, positiveness and unity it gives to diagnosis of spinal lesions.

The clinic of Dr. Hofsess of Kansas City, was a clear and concise demonstration of what a scientific "Convention," paper should be.

With cases of Pott's disease, lateral curvature, and arthritis deformans before us, he drew comparisons and conclusions, that make the confusing of these conditions so far as diagnosis goes practically impossible, but then in Dr. Hofsess we have an example of the good student, then the physician and now clear and clean cut in his lectures.

After we had been assured time and again that a correct diagnosis had been made, after a long but jolly night vigil, we saw the greatest osteopathic clinic of the meeting. That osteopathy has given to the practice of obstetrics a technic of great power and ingenuity can no longer be doubted, of course we must grant that the demonstration was given by master minds and hands by much experience and yet all so simple that it is beyond none of us given the same care and judgment to go and do likewise. Drs. Chas. Still and M. E. Clark owe the profession their studies and experience in the technique of osteopathic obstetrics and when it does come, another stone will be laid in the foundation of research work.

That's what made this Tri-State Meeting so important, its key-note was originality, the air was full of it, the work of Craig, Still, Clark, and McConnell stands forth as the culmination of effort to prove osteopathic theories. Craig in anatomy, Still and Clark in obstetrics, and McConnell in proving the very basic conception of osteopathy.

They have fortified our scientific contentions, made osteopathy stronger, more decidedly entrenched in its therapeutic position in the realm of science.

Our theories heretofore based on clin-

ical evidence, are being proven by actual dissections, mechanical demonstrations, microscopical investigations. These men have added another page to our roll of honor.

Dr. Carl P. McConnell's lecture was the piece de resistance of the convention. His dissections, gross and microscopical were beautifully shown by the aid of lantern slides; his is another instance of a tremendous amount of work. Often more than one hundred (100) sections were made. This slide here shown is one of them. Only one of them!! To Dr. McConnell must always belong the honor of having first conclusively proven the osteopathic theory that disease follows the lesion.

Great indeed must be the satisfaction of Dr. Hildreth the other officers of the M. O. A., and the faculty of the A. S. O., when they behold the work, the material for thought that has been given to the profession at this, the greatest session ever held by the M. O. A. Its importance has never been exceeded by any meeting national or state.

Dr. Homer Bailey, our new president, was now escorted to the chair, after appropriate remarks in which he outlined some of the work for next year, the historic gavel presented to the M. O. A. by our retiring president fell and—a crash. "This session of the Missouri State Osteopathic Association, stands adjourned to meet in Kirksville next year."

And so ended the 7th.

HERMAN F. GOETZ,
St. Louis.

A. O. A. Convention.

The next meeting of the A. O. A. will be held at Put-in-Bay, Ohio, August 6-10. An exceedingly interesting and instructive program has been arranged, and it now seems certain that we will have one of the best arranged, and it now seems the largest gatherings in the history of the association. A rate of one and one-third fare (possibly lower) will be in effect on the railroads. Excellent accommoda-

tions can be had at the Hotel Victory for \$3.00 per day.

Every osteopath, whether a member of the A. O. A. or not, is cordially invited to attend this meeting. Non-members who may be in attendance can be elected during the meeting, and participate in its proceedings.

A. L. EVANS,
President A. O. A.

Texas State Association.

The sixth annual meeting of the T. O. A. convened in the city of Waco, May 11th with Dr. A. D. Ray of Cleburne, President and Dr. J. L. Holloway, Dallas, Secretary and Treasurer.

Mayor J. B. Baker extended a royal welcome taking occasion to speak in most complimentary terms of osteopathy, declaring that after seeking health through drugs for a quarter of a century, he had finally obtained it through the skill of an osteopath.

Dr. Paul M. Peck responded in behalf of the association in his usual happy way. Mr. Davis, a representative of the city press made a delightfully humorous address in which he expressed the hope that we should come into possession of our just legislative deserts.

The annual address by president Ray on "Organization and Legislation" was a strong appeal to the membership for thorough co-operation to the end that a solid front be presented when our next legislature convenes. Among other recommendations was one to the effect that a quarterly publication be issued to keep all members informed respecting our progress and purpose.

The report of the Board of Trustees embodied a recommendation that the T. O. A. be incorporated. The papers having been previously prepared, by motion the old was merged into the newly incorporated association.

The recommendation that the old Senate Bill No. 61 be made the basis of legislative action next winter was adopted.

The sentiment of the association was overwhelming against any compromise measure, however, inviting it might be made by the "Regulars."

After the report of the committees, on membership by Dr. Peck and publication, by Dr. Holloway had been disposed of, Drs. D. S. Harris, Dallas, was called on for his paper, "Emergency Cases and their Treatment." Not being prepared, Dr. W. E. Noonan, Houston, discussed the subject, citing a number of cases illustrative of the application of osteopathy to same. Dr. A. P. Terrell, T. L. Ray and others followed in discussion.

Dr. J. F. Bailey, Waco, presented a paper on "Differential Diagnosis and Treatment of Gall Stones." Discussion was opened by Dr. Nellie Hassell of San Antonio followed by Drs. Norwood, Ray, Terrell and M. B. Harris.

A telegram was sent to the "Old Doctor" expressing sympathy on account of the death of his brother, also to Dr. Sisson in reply, congratulating him on his escape from the San Francisco earthquake.

A seven course banquet on the evening of the 11th, graced by the presence of the Mayor and his wife, was a delightful affair. President Ray served as toastmaster and responses were made by Drs. T. L. Ray, Holloway, Peck, Bennora Terrell and A. P. Terrell.

On Saturday morning the meeting opened with paper by Dr. Norwood of Mineral Wells, on "Nature and Treatment of Rheumatism." The writer showed his own patent devices for treatment of stiffened and drawn knee and spoke of the success that had thus far attended the treatment of such case. The paper was discussed quite at length by Drs. Loving, Peck, Bennora Terrell and others, the general sentiment being that Dr. Norwood's devices were exceptionally good for these conditions.

A Symposium,—“Lesions, Possible Effects and Clinical Demonstration in Correcting Same” was presented as follows: “Cervical Lesions,” by Dr. A. L. Bryan,

who took the place of Dr. C. S. Klein who was absent. “Lumbar Lesions” by Dr. Paul M. Peck, “First Rib” by Dr. T. L. Ray, “Pelvic Lesions” by Dr. A. E. Noonan. These talks and papers provoked much discussion in which nearly every member participated.

“Dorsal Lesions” was assigned to but not discussed by Dr. Rosa Bathrick, for lack of time to prepare.

Dr. Bennora Terrell's paper on “Menstrual Disorders including the Menopause” was one of the best of the association and on request will appear in due time in one of our publications.

The report of the committee on resolutions among other things contained the following:

The Texas Osteopathic Association in convention assembled hereby expressed its heartiest approval of the crusade against patent medicine now being waged by the publisher of Collier's Weekly. We believe the bringing before the public the facts pertaining to so-called patent medicines in their series of articles under the title “The Great American Fraud” will do much to enlighten the people on the evils of the patent medicine traffic.

We would appreciate these articles in pamphlet form and believe their general distribution will do much toward the protection of public health.

The following officers were elected for the ensuing year:

Dr. James L. Holloway, Dallas, president; Dr. J. F. Bailey, Waco, 1st vice-president; Dr. Julia M. Sarratt, Waco, 2nd vice-president; Dr. R. R. Norwood, Mineral Wells, secretary and treasurer.

Dr. Paul M. Peck, San Antonio, and Dr. W. B. Loving, Sherman were elected as trustees, for three years. The terms of Dr. D. S. Harris, Dallas and Dr. R. R. Norwood, Mineral Wells, having expired.

Houston was selected for the next place of meeting, the time being left to the president and secretary elect.

The following gains have been made during the year:

Dr. D. M. Barnes, Meridian.
Dr. B. W. Christensen, El Paso.
Dr. Maud G. Russell, Commerce.
Dr. Julia Sarratt, Waco.
Dr. D. L. Davis, Meridian.
Dr. J. O. Lowry, Ennis.
Dr. J. B. Lynd, Houston.
Dr. N. R. Lynd, Houston.
Dr. A. P. Terrell, Dallas.
Dr. R. M. Mitchell, New Boston.
Dr. R. P. Coulter, Hice.
Dr. Geo. A. Wells, Greenville.
Dr. Birdie Gayle, Waco.
Dr. Jesse Gildersleeve, Waco.
Dr. Eugene Sanner, Corsicana.
Dr. G. B. Armstrong, Dallas.

LOSSES.

Dr. L. B. Hughes, to California.
Dr. N. B. Barnes, to Colorado.
Dr. F. M. Bailey, to Indian Territory.
Dr. D. L. Clark, to Colorado.
Dr. J. H. Overton, resigned.

The meeting just held was the largest and best ever held in the six years the association has been organized. It is hoped by next year every reputable osteopath in the state may become affiliated with the state organization.

Kansas State Osteopathic Association
Wichita, Tuesday, June 19th, 1906.
Fifth Annual Convention.

OFFICERS.

President, Dr. J. L. McClanahan, Paola; vice-president, Dr. R. A. Bower, Eureka; secretary, Dr. Annie K. Conner Lamb, Ottawa; treasurer, Dr. J. H. Bower, Salina.

TRUSTEES.

Dr. Mitchell Miller, Wichita; Dr. H. K. Benneson, Clay Center; Dr. Linda Hardy, Hiawatha.

PROGRAM.

COUNCIL CHAMBER, CITY BLDG., JUNE 19.
10:30 a. m.

Address by President J. L. McClanahan, Paola.

Reading of minutes by secretary.

Report of treasurer.

Board of trustees.

Standing committees.

Application for membership.
Unfinished business.
Clinic—Dr. Geo. Laughlin, Kirksville,
2:00 p. m.

Paper—Neurasthenia—Dr. Gladdis Armor, Emporia.

Discussion, led by Dr. J. H. Bower, Salina.

Clinic—Dr. Geo. Laughlin, Kirksville.
Case reports—Drs. M. Hook, Hutchinson, G. B. Wolf of Ottawa, and others.

Paper—(To be supplied)

8:00 p. m.

What Osteopathy Can Do For Skin Diseases—Dr. Laughlin, Kirksville, Mo.

Clinic—Dr. Mitchell Miller, Wichita.

Business Session.

New business.

Election of officers.

Selection of next meeting place.

Western Pennsylvania Osteopathic Society.

The Western Pennsylvania Osteopathic Association held its second regular meeting at the Hotel Henry, Pittsburg, on Saturday evening, May 19th, with about forty-five osteopaths in attendance. A banquet opened the program with Dr. Chas. Hazzard of New York as guest of honor and Dr. Frank K. Heine of Pittsburg, president of the association, as toastmaster.

Dr. Hazzard read a very instructive paper on “Osteopathic Diagnosis” and conducted a clinic.

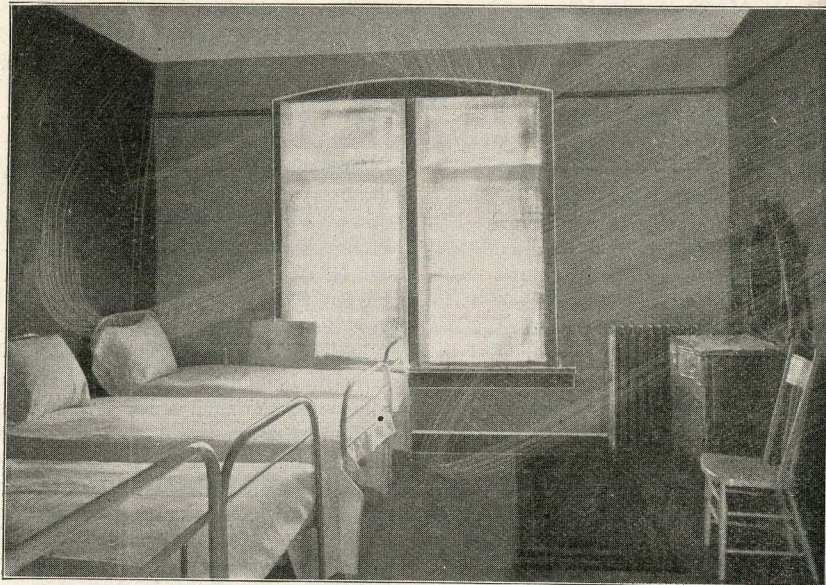
The meeting closed with a short business session in which the constitution governing the association was adopted.

F. J. MARSHALL,

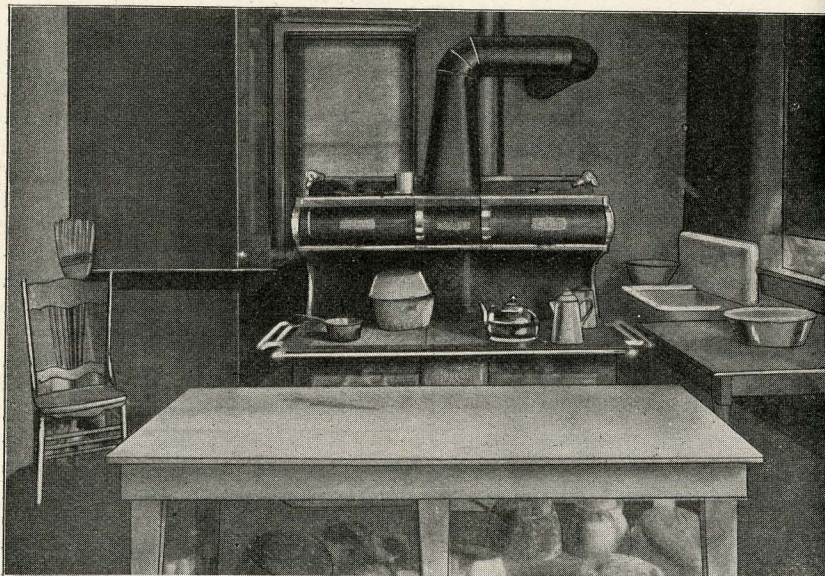
Secretary.

The Indiana Semi-Annual State Meeting.

It was the writer's pleasure to be present and take part in the program at the Indiana semi-annual state meeting held at LaFayette, May 18th. LaFayette is a good convention town and the two osteopaths located there are working in harmony and each enjoys an excellent practice.



ONE END OF A WARD, A. S. O. HOSPITAL.



KITCHEN, A. S. O. HOSPITAL.

In Indiana as elsewhere we found the competent osteopaths receiving the support and patronage of the best class of people. Indiana has about 100 recognized osteopaths, of this number 62 belong to the state association. About 50 were present at the LaFayette meeting. We were pleased to learn of the success of these practitioners, every one with whom we talked reported a good practice and that osteopathy was making a substantial growth in public esteem in his locality.

The matter that was of especial interest to us was to find that every practitioner expressed an increased confidence in his science, based upon no sentimental grounds but upon actual good results in practice. The Indiana association is certainly steadfast in the osteopathic principle that maladjustment of structure is the cause of disease. To this fundamental idea its members are adhering with commendable zeal. The present Indiana law, excluding new practitioners from locating in that state, is just as unsatisfactory to the profession in Indiana as elsewhere. The united support of the Indiana association will be given toward securing a better law at the first opportunity. In the afternoon session we were supplied with a large number and variety of clinics and were kept busy demonstrating through the session. At 8:00 p. m. Dr. C. P. McConnell gave his excellent lecture on research work, which was highly appreciated by every one present.

GEO. M. LAUGHLIN, D. O.

* * *

The Greater New York Osteopathic Society held its last meeting for the year, May 19, at the Fifth Avenue Hotel.

Dr. Francis A. Cave of Boston was the principal speaker of the evening and presented a very able paper on "Some Mechanical considerations in Scoliosis," which was followed by an interesting discussion.

Dr. Hart of Albany and Dr. Williams of Rochester were also present and gave

short talks on the result of the Legislation in this state.

The following officers were elected for the ensuing year: President, Dr. Clarke F. Fletcher; vice-president, Dr. Chas. Green; secretary, Dr. Evelyn K. Underwood; treasurer, Dr. M. Cebelia Hollister; keeper of records, Dr. J. A. DeTienne; directors, Dr. E. M. Herring, Dr. Geo. W. Riley and Dr. Arthur S. Bean.

The next meeting will be held September 15, 1906. EVELYN K. UNDERWOOD, Secretary.

* * *

Dr. Harris Replies.

I desire to call attention to the erroneous nature of some statements made in the April issue of the Journal of Osteopathy, Kirksville, in an editorial article entitled "Trouble in Massachusetts."

In view of the free use made of my own name in this and other matter printed in the same issue, and owing to my official connection with the Massachusetts College of Osteopathy, I am in duty bound to make the following statements of a personal character.

Apropos of the state legislative campaign in this state, I will submit the following statements, which will be a sufficient reply to the allegation that I have "been trying to give osteopathy a black eye" (See Week's letter); and I warmly challenge anyone to controvert the same.

1. In the attempt to secure a separate board of examiners in osteopathy, the Massachusetts College of Osteopathy took no official part whatsoever. As for its officers, some favored and supported the bill, whilst others remained passive or opposed the same.

2. The Massachusetts College of Osteopathy sent no petition to the legislature! Neither was any other petition sent to the legislature till this bill was hopelessly defeated.

3. As president of the College, I urgently requested the student body to take no part in the fight either individually or collectively.

We made this request to the students publicly and privately, in an official way.

It is quite obvious we have no authority over the students when they desire to act as independent citizens, and not on behalf of the college.

4. As to my personal attitude, I remained entirely passive in the matter of this bill; and never once asked, directly or indirectly, any friend, patient, legislator, or member of my profession to change his mind or his vote on this question.

5. I appeared before the Committee on Public Health, as I did five years ago, merely urging that all physicians be compelled to register. At this hearing I most emphatically stated that my appearance had no reference to the creating of examining boards; but only to urge compulsory registration, whether under one board or many. My remarks were so reported in the public press.

6. I have always favored the securing of a separate board of examiners for osteopaths in those states where the other schools were granted separate boards. In Massachusetts, where there is a composite board of examiners I favor representation on that board; and also compulsory registration.

7. In view of these facts it is painfully silly to try to saddle the defeat of a bill which had the mark of defeat set upon it from its inception, upon any one man or few men. It is ridiculous to suppose that the inactivity of one or two men would so influence the legislative bodies as to cause them to defeat a meritorious bill.

8. In the report of the debate in the House you take occasion to reproduce that portion of Rep Week's speech wherein he says the reputation of a "certain school, (obviously meaning the M. C. O.) is, to say the least, somewhat in question, if I am correctly informed."

We take occasion to say that despite the uncomplimentary references of the young enthusiast from Everett, who represented an element in the osteopathic

ranks which has been bitterly opposed to the M. C. O. on purely personal grounds. The said college has never been in a more healthy state; has never enjoyed a more enviable reputation in the whole country; and has never before received such liberal legislative recognition as it has received in the present year. The unanimous support given our degree bill by the committee on Education, in the Senate, in the House, and its ready approval by the Governor, should plainly show that any "question" as to the reputation of the M. C. O. arises only in the minds of its natural enemies, viz., those who would profit by, and exult in its failure * * *.

Signed WILFRED E. HARRIS.

* * *

Keep Track of One Another,

In the January '06 graduating class of the A. S. O. were fourteen students who came from the Buffalo school. While there they seemed like the members of a great family. In the class-rooms their seats were close together and they were often seen in groups at times of intermission.

Since graduating and entering the field these fourteen have established a "chain letter" correspondence that others might well imitate. The list is composed of the following:

THE BUFFALO FOURTEEN OF A. S. O. JANUARY, '06.

Dr. Augustus C. Paul, 748 Ellicott Square, Buffalo, N. Y.

Dr. Edmire M. Cabana, 219 Potomac Ave., Buffalo, N. Y.

Dr. Jennie M. Schofield, 110 Highland Ave., Buffalo, N. Y.

Dr. Jane E. Lockwood, 93 Prospect Ave., Buffalo, N. Y.

Dr. Frances M. Witmer, Station A, Box 496, Niagara Falls, N. Y.

Dr. Eugene M. Casey, 420 Security Mutual Bldg., Binghamton, N. Y.

Dr. Oscar F. Welch, 421 Weightman Bldg., 1524 Chestnut St., Philadelphia, Pa.

Dr. Robert Cornelius Cox, 421 Weight-

man Bldg., 1524 Chestnut St., Philadelphia, Pa.

Dr. Ernest W. Robson, The Pierrepont, 43 West 32nd St., New York, N. Y.

Dr. Warren B. Mitchell, 414 Clinton Ave., Newark, N. J.

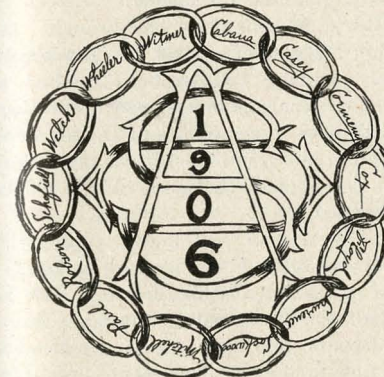
Dr. Howard J. Cormeny, 42 West Market St., York, Pa.

Dr. Wesley S. Lawrence, 310 Robinson Bldg., Elmira, N. Y.

Dr. Glenn B. Wheeler, Wahpeton, N. D.

Dr. Ambrose B. Floyd, The Markeen, Buffalo, N. Y.

No. 1 writes a letter and sends it to No. 2, who writes one and sends both to No. 3, and so on, so that when each receives the budget it contains thirteen letters from his class-mates. They have special letter heads for their correspondence, which, in addition to the above list has this unique "endless chain" design.



The scheme is a most admirable one and was conceived and put into operation, we understand, by Dr. Floyd, No. 14 on the list

* * *

Join Our National Association.

We wish to call attention to the fact that the constitution of the A. O. A. provides that all who join that organization within three months prior to an annual meeting will have their membership extended to the close of the next annual

meeting following it. Those who apply at once, and are elected to membership, will receive the June, July and August Journals for this year, and will have all the privileges and benefits of membership in the A. O. A. during the coming year. Any osteopath who desires a sample copy of the Journal of the A. O. A. can have same by addressing the editor at Chattanooga Tenn. The membership fee, which in all cases must accompany the application, is \$5.00. Application blanks can be had by applying to the Secretary, Dr. H. L. Chiles 118 Metcalf Building, Auburn, N. Y. Every member of the profession should join the A. O. A., and assist in the great work in which it is engaged.

* * *

Colorado Association.

EDITOR JOURNAL, Kirksville, Mo.

DEAR DOCTOR:—As Dr. McConnell of Chicago can be with us on June 9th the trustees have called a meeting of the Colorado Osteopathic Association for that date. I enclose the program prepared for that time and trust you and your friends will avail yourselves of this opportunity. Dr. McConnell needs no word of commendation to the osteopathic profession.

NETTIE HUBBARD BOLLES, D. O.,
Secretary.

* * *

Buffalo Association.

The Buffalo Osteopathic Association held its monthly meeting June 4th at the apartments of Dr. Ambrose B. Floyd in The Markeen. The meeting was well attended and made especially interesting by a paper presented by Dr. A. W. Crawford setting forth his treatment at the hands of M. D's. in a recent case of cerebro-spinal meningitis, which he was most successfully handling, but which resulted fatally when drug medication was resorted to. His paper would be of great value to the profession if it could be put into the hands of the public in general.

The Journal of Osteopathy

PUBLISHED MONTHLY

BY THE

JOURNAL OF OSTEOPATHY PUBLISHING CO.,

KIRKSVILLE, MISSOURI.

R. E. HAMILTON, D. O., EDITOR.

Subscription, \$1.00 per year in advance.

Entered at the Postoffice at Kirksville, Mo., as Second Class Matter.

Is This a Fake?

The following article has been repeatedly quoted by osteopaths and has been the cause of considerable discussion. In response to an inquiry from Dr. Muttart of Philadelphia, the editor of the Journal investigated and found no such article. In the first place the "United States Health Reports" are called "Public Health Reports" and there is no issue of June 1, 1899. Secondly the Public Health Report published June 2, 1899, does not contain the article in question. We dislike to spoil so good an advertisement and will welcome any explanation of the true source of this article.

QUOTATION FROM A. N. TALLEY, JR., M. D.

In United States Health Reports, June 1, 1899.

"Now advanced thought and mature experience, as well as awful failures and blunders of the past, the memory of which will not be forgotten, at least by the present generation, have prepared the minds of all sensible people to accept better methods and a better practice. Fortunately such better methods and practice are available and have been proved beyond a question of doubt not only to those who have seen and experienced their wonderful results, but to the scientific critics as well.

"We have been greatly interested in the work of our experts as they have reported their progress from time to time, and we have carefully followed their investigations, convinced what their conclusions would be. Their full reports

are now before us, unanimously approved by our medical staff, and it gives us great pleasure to extend to osteopathy the official recognition of the United States Health Reports."

* * *

Clinics at the M. O. A. Meeting.

It isn't every school that can furnish an obstetrical clinic just when it is wanted. This is what the A. S. O. did for the Missouri Osteopathic Association. In the morning the visitors witnessed six surgical operations. Two for club foot, (one talipes arcuatus and one talipes varus), a perineorrhaphy, a double harelip, and a circumcision. Promptly at 1:30 the visiting physicians were called to the clinical amphitheater to witness the obstetric clinic, which came promptly on time and without any accident.

* * *

Harry F. Simmons Sues Dr. Francis J. Beal For Slander.

Harry F. Simmons has brought an action for slander against Dr. Francis J. Beal, claiming he has been dubbed a faker, criminal and imposter by his brother practitioner in the efforts of Doctor Beal to injure him (Simmons) in his profession and damages in the sum of \$25,000 is demanded.

Dr. Beal is a well known osteopath. The name of H. F. Simmons does not appear in the osteopathic directory. He is one of the free treatment kind. Three treatments free and further treatment for one dollar per treatment. Another example to show us that we need more and better osteopathic laws.

* * *

The Mississippi Bill—Passed by the House of Representatives 62 to 2.

Chapter 104—Physicians.

Osteopaths—Any person desiring to practice osteopathy in this state must first obtain a license from the state board of health by passing a satisfactory examination in anatomy, physiology and hygiene; provided that graduates of a reputable college of osteopathy now engaged in that

practice in this state shall not be examined as to learning but shall make satisfactory proof of such graduation and of good character, and pay a fee of twenty-five cents. License to practice osteopathy must be recorded as required by law for license to practice medicine, with like penalty on failure to go on record.

* * *

Osteopathic Bill in the United States Senate.

The osteopathic bill "Senate bill 5221" was recently recommended by the Senate Committee on the District of Columbia. On May 9th the Medical Society of the District presented a remonstrance, which was answered by the Osteopathic Association of the District of Columbia. The answer was presented by Senator Foraker and was printed May the 16th (Senate Document No. 445). The answer is an able argument, presenting thoroughly the osteopathic view and giving a good digest of osteopathic laws in the United States.

* * *

Program of the Missouri Osteopathic Association.

FRIDAY MORNING.

9:00—Address of Welcome, Dr. W. D. Dobson, of Kirksville.

9:15—Address, Dr. A. T. Still.

9:30—Response, Dr. A. G. Hildreth, St. Louis.

10:00—Paper, "Professional Courtesy," Dr. S. T. Lyne, Kansas City, Mo.

Discussion led by Dr. Charles Cornelius of Carthage, Mo.

11:00—"Anatomy Applied," Dr. A. Still Craig, Maryville, Mo. Discussion led by Dr. W. D. Dobson, Kirksville.

AFTERNOON SESSION.

1:30—Clinical Demonstration: Differential Diagnosis of Pott's Disease, Lateral Curvature and Arthritis Deformans of the Spine, by Dr. J. W. Hofsess, Kansas City, Mo., with four patients as subjects.

2:30—Paper: "The Graphical Representation of Spinal Curvature, with Pantograph," Dr. H. F. Goetz, St. Louis.

3:30—Paper: "The Blood in Health and Disease," Dr. S. W. Longan, Kansas

City, Mo. Discussion led by Dr. A. B. King, St. Louis.

EVENING SESSION.

Inspection and dedication of the new A. S. O. Hospital.

Reception and short practical talks.

SATURDAY MORNING, MAY 26.

9:00 to 12:00—Surgical clinics by Drs. F. P. Young and Geo. A. Still in the surgical amphitheater of the hospital. The following operations were beautifully and skilfully performed in the presence of about three hundred, including the post graduate and senior students of the A. S. O.: Double hair lip, circumcision, and periorrhaphy, tongue-tie and two cases of club foot.

AFTERNOON SESSION.

1:00 to 2:00—Obstetrics. Lecture and question answering by Dr. M. E. Clark.

2:00 to 2:40—The management of an actual case of labor by Drs. Clark and C. E. Still.

3:00 to 4:30—Osteopathic clinics, in charge of Dr. Geo. M. Laughlin. Interesting clinics were given by Dr. W. F. Traugher, Mexico; Dr. A. G. Hildreth, St. Louis; Dr. E. C. Link, Kirksville; Drs. W. J. Conner and A. L. McKenzie, Kansas City.

5:00—The following officers were elected for the ensuing year:

President—Dr. Homer E. Bailey, St. Louis.

First Vice-President, Dr. S. W. Longan, Kansas City.

Second Vice-President, Dr. W. P. Abell, Palmyra.

Treasurer—Dr. W. E. Beets, St. Joseph.

Secretary—Dr. Minnie Potter, Memphis.

Trustees—Drs. Geo. M. Laughlin, A. G. Hildreth, W. J. Conner, T. L. Holme, A. Still Craig.

EVENING SESSION.

8:00—State Editor's report, Dr. Minnie Potter, Memphis, Mo.

8:30—Address by Dr. Chas. C. Teall on the advantages of organization, the work of the A. O. A. and the importance of co-operation.

9:00 to 10:30—Lecture: "Research Work," by Dr. Carl P. McConnell.

Of the visitors there were 101 who signed the register at the Missouri meeting. We are compelled to omit their names for lack of space.

* * *

Death of Dr. Edward C. Still.

Dr. Edward C. Still, of Macon, Mo., died May 8th after an illness of several months. He was in his 83rd year. His death was the result of an injury sustained from a fall about three months ago, although his health had not been good for many years. Dr. Edward C. Still is Dr. A. T. Still's oldest brother and had been associated with him more or less for the past thirty years in the development of osteopathy. Dr. A. T. Still in speaking of this brother said, "He was the only stake I had to lean upon in the early days of osteopathy when I needed help and encouragement. When others told me to give up osteopathy and return to my medical practice he told me to go on if I thought I had discovered a truth. For his wise counsel and encouragement his name will be given a prominent place in the founding of osteopathy." The Macon Republican of May 12th contained the following sketch of his life:

"Dr. Edward C. Still was born in Tazewell county, Va., January 15, 1824. His father, Abram Still, who was a minister of the Gospel and also a physician, was the pioneer of the M. E. Church in Macon county and of the medical profession. He preached the first sermon ever delivered in this county by his denomination and administered the first dose of medicine ever given by prescription from a physician in this county. Before their residence in this state the family resided in Jefferson county, Tenn., where Doctor Still attended Holston seminary. In 1837 the family immigrated to Missouri, settling near old Bloomington, Macon county. The day they entered Bloom-

ington, the commissioners located the county seat of Macon county at that place, which then included the present counties of Macon, Adair, Schuyler and Putnam. The commissioners had just driven the first stake locating the county seat an hour before the wagons of Rev. Still reached the scene. At the age of 17 Doctor Still entered his father's practice.

"On the 20th of April, 1848, Dr. Still was married to Miss Mary S. Powell. He continued his practice residing on a farm near Bloomington, until the time of war. Conscientiously a Union man he was made assistant surgeon of the Eleventh Missouri State Militia, which was stationed most of the time at Macon. He therefore removed his family to this city and has continued to reside here. Since the war he was connected with the pension business as examining surgeon. His upright life has ever challenged and won the respect and confidence of those among whom he lived. October 20, 1882, he had the misfortune to lose his wife. Since then he has made his home with his son, Thos. A. Still.

"Besides the son mentioned another son, Dr. John Still, resides in Los Angeles, Cal. Four sons and one daughter who became the wife of Dr. R. H. Dunnington of Atlanta, preceded him to the grave.

"Dr. Still was a member of the local order of G. A. R., Macon chapter of Royal Arch Masons, Censer chapter, No. 172, A. F. & A. M., and Censer chapter, No. 50, Order of the Eastern Star. He was probably the oldest Mason in Macon county having been made a Mason in the early 50's.

"Dr. Still is a brother of Dr. A. T. Still, founder of the school of osteopathy in Kirksville, Dr. James Still of Maryville and Dr. Thos. Still of La Panza, Cal. Mrs. Adams of Los Angeles, Cal., and Mrs. Rovia Clark of Kansas are sister of the deceased."

Semi-Annual Commencement of The American School of Osteopathy.

June 10-14, 1906.

To the June Class of 1906:

"If you can't be Men and Women go hang yourselves and let the Buzzards pick you." —A. T. Still.

Baccalaureate Sermon, Sunday, June 10, 1906, 2:30 p. m.

Address . . . Rev. W. C. Templeton, D. D.

PROGRAM.

Class Day Exercises.

Wednesday, June 13, 1906, 9:30 a. m.
 March Orchestra
 President's Address Lester R. Daniels
 Song Glee Club
 Class History Miss Leone Dalton
 Class Song "Gem of the Ocean"
 Class Poem J. N. MacRae
 Music Orchestra
 Song Glee Club
 Class Prophecy Hugh R. Russell
 Class Song Heidelberg
 Junior Farewell J. A. Williamson
 Old Doctor's Farewell Pres. A. T. Still
 Senior Farewell Class
 Music Orchestra

PROGRAM.

Commencement Exercises,

Thursday, June 14, 1906, 8:00 p. m.

Music March
 Invocation Rev. I. F. Lusk
 Music Orchestra
 Address Class Representative
 Mr. A. T. Sullivan
 Music Orchestra
 Address Post Graduate Representative
 Dr. Carrie Burk Taylor
 Music Orchestra
 Address Dr. G. M. Laughlin
 Music Orchestra
 Presentation of Diplomas Dr. A. T. Still
 Music Orchestra

* * *

Prize Essay Contest.

Prizes offered for articles written for the Osteopathic Journal.

Conditions: Articles must be submitted before the first of September, 1906. All articles to become the property of the Journal of Osteopathy Publishing Co.

PRIZES.

Monthly—An osteopathic book—choice of winner—to be given for best articles submitted each month.

FINAL PRIZES.

1. Wood's Reference Handbook of the Medical Sciences, VIII Volumes, value \$56.00
 2. Set of Osteopathic books consisting

of—

A. T. Still's Philosophy and Mechanical Principles of Osteopathy \$ 3.00
 Young's Surgery \$ 5.50
 Clark's Applied Anatomy 6.25
 Clark's Gynecology 5.00
 Hazzard's Practice of Osteopathy 3.00
 Hulett's Principles of Osteopathy 3.00
 Booth's History of Osteopathy 3.00
 Tasker's Principles of Osteopathy 5.00

Total, \$33.75

3. One hundred copies of the Osteopathic Journal per month with card for six months \$15.60 to \$17.40
 4. Appleton's Clinical Diagnosis II Vols.
 5. Edgar's Obstetrics 6.00
 6. Osler's Principles and Practice of Medicine 5.50
 7. Diseases of the Nervous System, Church and Peterson 5.00
 8. Howell's Physiology
 9. Chart—The Nervous System, Mathews and Weber 5.00
 10. Four years subscription to the Journal of Osteopathy 4.00
 11. The author of every article used will be given not less than 25 copies of the paper containing the article.

In case the prize winner has the books offered, the Journal will exchange them for books of equal value chosen by the winner.

The articles must not be signed, but numbered and the name and address of the sender together with the number on the article sent on a separate paper.

The judges will be chosen from the post-graduate class of the A. S. O.

Besides the above prizes the Journal of Osteopathy offers a monthly prize of one osteopathic book (book to be chosen by winner) for the best scientific editorial for the Journal of Osteopathy.

Program for Semi-Annual Meeting of the Colorado Osteopathic Association, to be Held June 9, 1906, at room No. 223 Charles Block, Denver, Col.

Morning Session: 9:30 to 11:30 a. m. Business.

Paper, Dr. H. A. Bolles, "Some Chemical Aspects of Excretion, with special reference to Uric Acid." Discussion led by Dr. B. F. Richards.

Afternoon Session: 2:00 to 3:00.

Report of a Congenital Hip case, Dr. C. C. Reed

Paper, D. L. Clark, Ft. Collins. Discussion led by Dr. L. B. Overfelt of Boulder.

4:00 to 6:00 p. m. Informal reception to the osteopaths and their friends to meet Dr. Carl P. McConnell of Chicago.

Evening Session: 7:30 p. m. At the Woman's Club Building.

Lecture, "The Osteopathic Lesion" by Dr. Carl P. McConnell of Chicago.

All osteopaths and their friends are cordially invited.

* * *

Suicide in a Cell.

Henry W. Johnson, also known as Dr. H. Wilmot Johnson, osteopath, who was arrested last night for drunkenness, was found dead today in a cell in a south end police station, with his body suspended by means of a knotted handkerchief from a cell door. Johnson had been living for several months with Mrs. Anna Fortner and Mrs. A. M. Wenz, Chinese missionaries, who have been staying at Appleton street in this city. He formerly lived in Worcester and came here (Boston) to study osteopathy. He has relatives at Salisbury Beach, N. H.—Brocton Times, May 28th.

* * *

Book Reviews.

Wood's Reference Handbook of the Medical Sciences, embracing the entire range of scientific and practical medicine and Allied Science. Volume II, 838

pages. Illustrated by numerous chromolithographs and seven hundred and sixty five half-tone and wood engravings. Price per volume, cloth, \$7.00; half morocco,—

Among the many good things in this volume is a very complete article on the clinical examination of the blood. Blood examination is becoming very popular in some localities and thorough articles of this kind make valuable reference for the practitioner. Three hundred and twenty pages of this volume are devoted to discussion of the brain. It also contains a useful article on catheterization, showing the various methods of procedure.

* * *

A Text-Book of Physiology

for Medical Students and Physicians. By William H. Howell, Ph. D., M. D., LL. D., Professor of Physiology, Johns Hopkins University, Baltimore. Octavo volume of 905 pages, fully illustrated. Philadelphia and London: W. B. Saunders & Company, 1905. Cloth, \$4.00 net; Half Morocco, \$5.00 net.

There are now two physiologies published which are of especial interest to the osteopathic profession because of the thorough and logical manner in which they present the physiology of the nervous system. One of these is Howell's new Text-book, which beside the excellent chapter on the vaso-motor contains much that is of especial interest to the osteopath. This book is unusually free from "opinions" of the author. Each theory is carefully weighed and is given with its experimental authority. The chapter on digestion is especially good incorporating as it does the latest researches of Pawlow and his pupils.

* * *

Dr. Tete Wins.

Dr. Henry Tete of New Orleans, La., won the Osteopathic Journal's prize for May.

Personals.

Dr. Carrie M. Mabis has located at Woonsocket, S. Dak.

Dr. Arthur Taylor of Northfield, Minn., has purchased a home in that place and will move in June.

Drs. H. J. Clements and Gertrude Wilkins Clements have located at 425 Waverly St., Waverly, N. Y.

During July and August, Dr. Dora Wheat of Louisville, Ky., will be at the Hotel Athenæum, Chautauqua, N. Y.

Dr. Mary E. Smith, of La Harpe, Kan., has been appointed examining physician for the Royal Neighbors, a Woman's Insurance Company.

A CORRECTION: Dr. J. D. Cunningham's article, Inside the Fence, which appeared in the May issue of the Journal was read before the Sixth District Society instead of the Illinois State Association.

Among the visitors at the A. S. O. this month are: Dr. A. D. Glascock, Owosso, Mich.; Dr. Wm. J. Eales, Belleville, Ill.; Dr. Wm. Graves, Jefferson City, Mo.; Dr. P. B. Snively, Paris, Mo.; Mrs. P. R. Cain, Hannibal, Mo.; Dr. A. H. Davis, Niagara Falls, N. Y.

Dr. J. E. Wheelock has gone to Colorado on account of his health. He reports that he has entirely regained his health and will be associated this summer with Dr. H. K. Gibbs of Delta, Colo.

* * *

Deaths.

DIED—At Des Moines, Ia., of Bright's disease, June 1st, 1906; Dr. L. W. Lyda. He was buried at La Plata, Mo. His son, Dr. Roscoe Lyda, is a member of the junior class of the A. S. O.

DIED—May 14, 1906, of angina pectoris, Dr. Clara L. Milner at Chicago, Ill. Dr. Milner graduated at the A. S. O. in 1901.

DIED—May 22, 1906, R. G. McDaniel. He was buried at Hemple, Mo. He was

the father of Dr. A. C. McDaniel, of San Francisco, Calif.

DIED—At the home of her parents at Livia, Ky., April 30th, Lena H. Moseley wife of Dr. J. R. Moseley, Georgetown, Ky., complication of troubles caused her death.

DIED—Of apoplexy, May 22, 1906, John Franklin Bullard, son of Dr. and Mrs. J. R. Bullard, Marshalltown, Ia.

DIED—Mrs. Dollie A. Graves, May 18, 1906, at her home in Kirksville, Mo. Mrs. Graves was the mother of Dr. Wm Graves of Jefferson City, Mo.

* * *

Reduced Rates to the California Meeting.

The Southern Pacific and Santa Fe railroads will sell round trip tickets on the certificate plan to all desiring to attend the fifth annual meeting of the California Osteopathic Association, June 29th and 30th, to be held at Los Angeles. Tickets sold ten days before the meeting good to return 48 hours after meeting has closed.

* * *

WANTED.—Man osteopath to take charge of practice for six months in California town of 12000. Must furnish good references. Address E. M., care of Journal.

* * *

WANTED.—A gentleman, D. O., to continue a good practice with a lady in a Michigan city.

* * *

Notice!

FOR SALE.—A practice in a Pennsylvania town of 10,000. "Location for lady practitioner." Address, "I." care of Journal.

* * *

FOR SALE—INDIANA—HOSPITAL and residence combined. Town of 10,000; neighboring town of 10,000; smaller towns and large territory, all with no other hospital. Building cost \$10,000. Two lots 50x125 each. Completely furnished. Can be bought for \$5,000. Best reasons for selling. Address, E. R., this office.

Change of Address.

Dr. Nannie K. Chappell has moved from the Odd Fellows Bldg., to the Missouri Trust Bldg., St. Louis, Mo.

Drs. Lee C. and Edith A. Deming have given up their Los Angeles office and will hereafter practice in Pasadena alone.

Dr. W. C. Swartz from 44 Vermilion St. to 315 Odd Fellows Bldg., Danville, Ill., to Nezperce, Idaho.

Dr. Chas. La Rue, from Franklin, Ky., to Hibbardsville, Ky.

Dr. O. C. Robertson, from Utica, Ky., to Cynthiana, Ky.

Dr. G. S. Nazor, from Astubula, Ohio, to Grayville, Ill.

Dr. Ralph L. West, from 34 Grand St., White Plains, N. Y., to 51 East 25th St., New York City.

Dr. R. E. L. Sevier, from Pomona Cal., to Monrovia, Cal.

Dr. Jos. W. Martin, from Albert Lea, Minn., to 59 Court St., Brooklyn, N. Y.

Dr. F. M. Witmer, from Niagara Falls, N. Y., to Leroy, N. Y.

Dr. O. J. Courtney, from Russell, Kan., to 35 Nulfekuhler, Bank Bldg., Leavenworth, Kans.

Dr. W. H. Elmore, from Louisiana, Mo., to Bowling Green, Mo.

Dr. H. E. Penland, from Eugene, Ore., to Newport, Ore.

Dr. Chas. W. Heinz, from Lynchburg, N. D., to Castleton, N. D.

Dr. S. C. Robinson, from Auburn, Ind., to Rensselaer, Ind.

Dr. J. E. Olson, from Monmouth, Ill., to Bushnell, Ill.

Dr. A. M. Oswalt, from South Bend, Ind., to Auburn, Ind.

Dr. H. E. Bailey, announces that after

three and one-half years in the Century Bldg., and three one-half years in the Odd Fellow's Bldg., that he has removed to permanent quarters on second floor, Frisco Bldg., St. Louis.

Dr. J. Ellen Gildersleeve, from Texarkana, Ark., to Waco, Texas, where she will be associated in practice with Dr. J. F. Bailey.

Dr. Stella T. Smith, from 201 Bixby Bldg., Long Beach, to 627 South Flower St., Los Angeles, Calif.

Dr. L. B. Overfelt, from I. O. O. F. Bldg., to Rogers Blk., Boulder, Colo.

Dr. F. D. Mitchell, from Canandaigua, to Hinton, West Va.

Dr. R. M. Mitchell, from New Boston, Texas, to Texarkana, Ark-Tex.

Dr. Jennie Mitchell, from Omaha, Tex., to Texarkana, Ark.

Dr. Louisa Flanagan, from El Paso, Tex., to 146 Westminster St., Providence, R. I.

Dr. A. W. Berch, from La Cross, Wis., to Milwaukee, Wis.

Dr. S. W. Downey, from New Brighton, Pa., to 6013 Plum Ave., Pittsburg, Pa.

Dr. T. P. Ross, from Land Title Bldg., to 225 So. Broad St., Philadelphia, Pa.

Dr. J. D. De Shazer, from San Rafael, Calif., to Ouray, Colo.

Dr. Alice I. Beebe, from 206 Post Bldg., to 313 Ward Block, Battle Creek, Mich.

Drs. Mitchell and Minnie Stanley Miller, from Wichita, Kans., to Farmers Bank Bldg., Stafford, Kans.

Dr. J. H. Wilkins announces his removal from the Carlin House to his new home at 412 D. St., McMinnville, Ore.

Drs. S. B. Miller and E. H. Beaven have formed partnership at Cedar Rapids, Iowa, 1060 3rd Ave.

Professional Cards of Regular Osteopaths

Those whose cards appear in the columns of this Journal are endorsed by the American School of Osteopathy as qualified practitioners. All are graduates of recognized schools.

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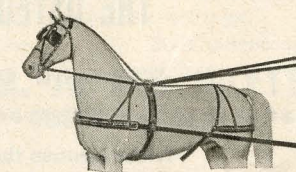
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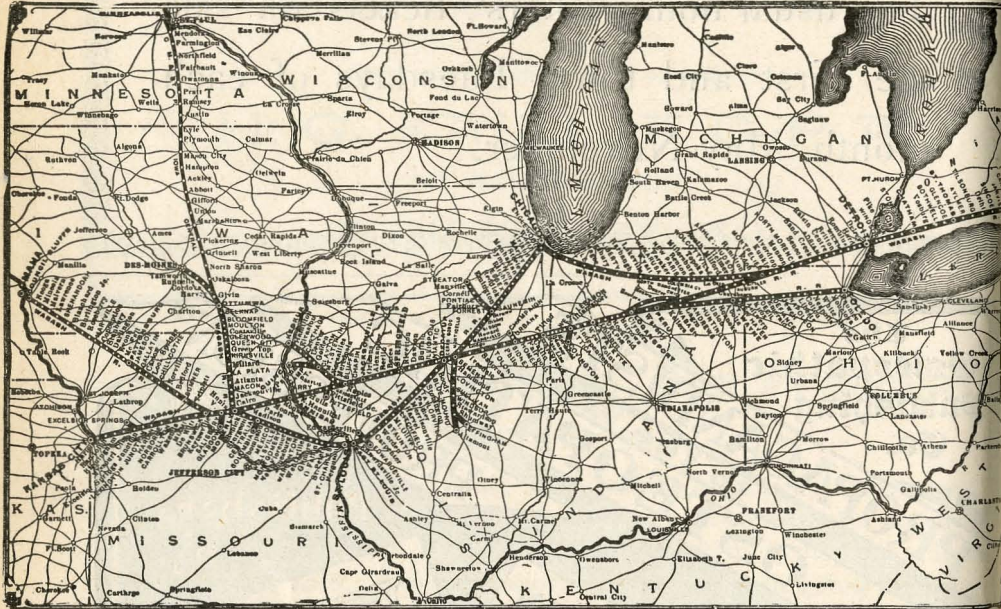
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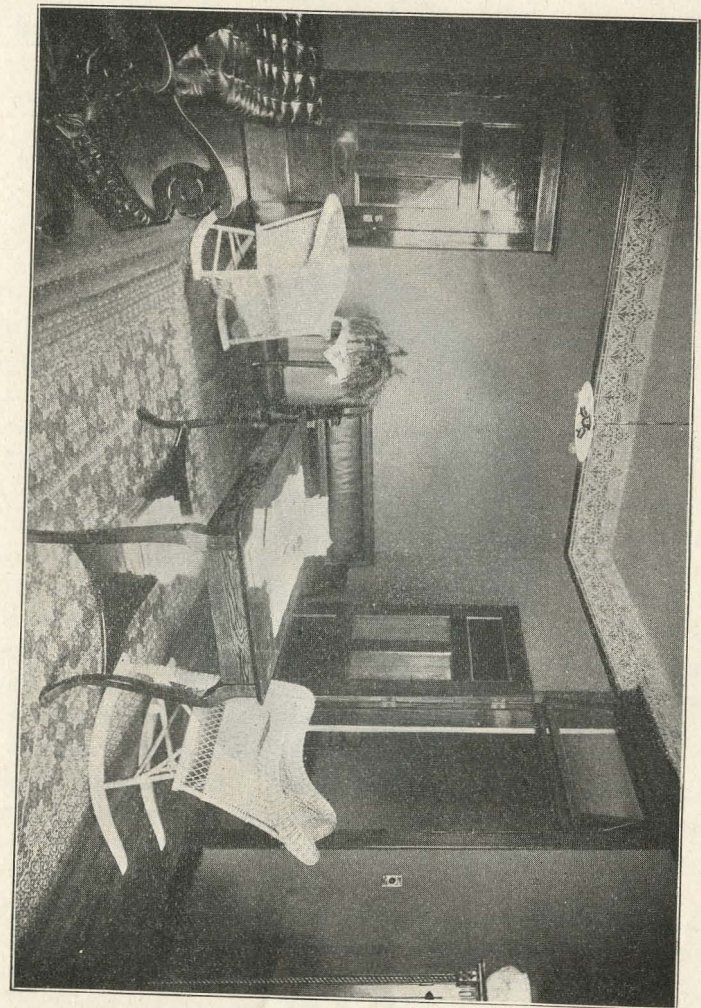
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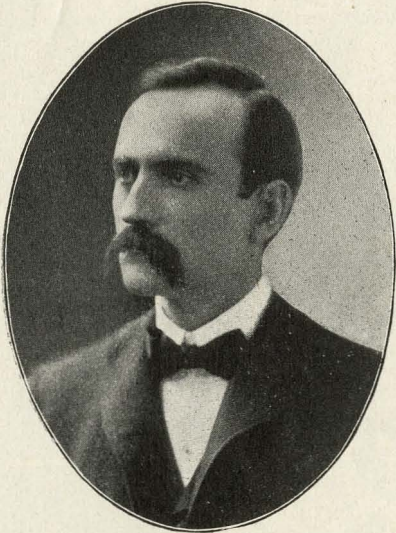
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