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CHIROPRACTIC ADEQUATELY CONSIDERED WEIGHED IN THE BALANCE AND FOUND OUT.

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What is called chiropractic is fundamentally osteopathic in principle. I say this advisedly. Any method that has for its end the adjustment of vertebræ is exclusively osteopathic. This cannot be gainsaid. Vertebral adjustment for the removal of the cause of disease or malfunctioning, was, and is, the foundation of osteopathy, the most scientific and rapidly growing school of healing, in the world.

Osteopathy had demonstrated and successfully established this principle for nearly a quarter of a century before chiropractic was heard of. Chiropractic confines itself exclusively to vertebral adjustments (but these are not really adjustments, as I shall soon show) and so confining itself it finds itself contained in, a subdivision of, osteopathy, in principle as I have said before, though not in practice, I am happy to say.

Chiropractic.

Chiropractic means "done with the hand." It is certainly not done with the head. In fact, what ostensibly is aimed to be done, is seldom done at all. Certainly someone is done. Instead of calling it chiropractic I call it chiroimpractic, because it is impracticable, does not work, because the method applied does not attain the end, except by a happy accident. I speak from considerable acquaintance with chiropractic "literature" and from information given me by patients who had been subjected to the pile-driving blows of chiropractic "adjustments": How different they found the scientific adjustments of osteopathy. In addition to these experiences, I spent several weeks at "Chiropractic's Fountain Head."

Chiropractic is Primitive Osteopathy.

By "Primitive Osteopathy" I do not mean osteopathy in its early days under Dr. A. T. Still, but osteopathy as we might imagine it being practiced by some barbaric, semi-civilized or savage people. To be laid face down on two stools, your chest on one, your thighs on the other, and your abdomen suspended like a Maine "buckboard" between the two, is bad enough, goodness knows, but, while you are in that position to receive a heavy thud (generally several) in the back, like a house falling on you, is, to put it mildly "rough" on the patient. Even Torquemada could hardly have invented, for the Spanish Inquisition, a better method of extorting confessions. I think the Police might adopt it by way of a "sweat-box."

If chiropractic believed that disease was a demon that had taken possession of the body, such a method would be just the thing to knock it out, and the patient too. I have seen patients assisted to rise from these stools, too dizzy to stand, pain visaged in every feature and tears in their eyes. Surely this is a grotesque and unwarranted application of the simple and wonderful osteopathic principle.

The Adjustments do Not Adjust.

I have said that the adjustments do not adjust. The reason for this failure is the bad mechanics of the method. A little explanation is all that is necessary to clear up this point. The body being suspended between these two stools, brings the posterior borders of the vertebral bodies along with the intervertebral cartilages, together under great pressure. In various places along this jammed up mass of spinal column, a jab is made with both hands in the belief that certain vertebræ can be moved. But it is a fatuous belief. It is hard to conceive how anyone acquainted with the anatomy of the spinal column and with the first principles of medicine, could adopt such a method. But there it is. The jar to the system produced by the force required to try to make an adjustment after this manner, is so great as to injure rather than benefit, as I have intimated, I have seen patients, mostly students at the school of chiropractic, (for the average patient who is paying for what he gets, could not bear up so long) who had taken daily treatments or "adjustments" for from six to nine months, still without having that vertebræ fixed, but, instead, several others were out or subluxated, and so they go on. "Truly the remedy is worse than the disease."

Osteopathic Adjustments Compared.

Now compare this thoughtless thumping, I might more correctly say, jumping on a person, literally speaking, with the osteopathic way.

Osteopathy besides making a more accurate examination to begin with, first loosens up or relaxes the surrounding tissues, which in itself is an immense benefit. This being done, osteopathy does not suspend the patient in a strained position, between two stools, but places him comfortably upon a level table, so that the spinal column is relaxed, then by the appropriate use of the body as a lever, power is applied at the appropriate place and the adjustment made without violence. Or again it is a case where the osteopathic adjustment can be better applied while the patient is seated on the stool. The same principles are applied with suitable modifications. Everything is done, having regard to the nature of the articulation, the condition of the patient and his previous history. The osteopathic adjustment is varied to suit the part to be adjusted. But in chiropractic there is no preparation of the tissues for adjustment, no previous history of the patient is considered, and only the one push in the back for all conditions. Well, what can you expect.

Chiropractic is Mutilated Osteopathy.

I said just now that chiropractic was "primitive" osteopathy, but that is rather too mild a term. Osteopathy was a beautiful creation when chiropractic came on the scene. Osteopathy is still a beautiful creation and growing more beautiful and complete every day. But some effigy of osteopathy was taken and badly disfigured, I might say hacked. The face, hands, arms, ribs, hips and legs have been hacked off. All that is left is the spinal column, the torso, and that is scarcely recognizable. There is a beauty "innate" in the mutilated Venus de Milo, but there is no "innate" beauty in the chiropractic fragment. As I say it was an effigy that was despoiled, not the original, for that cannot be disfigured. Only some people who have been informed at "chiropractic's Fountain Head" "that a part is greater than the whole" have wondered what the whole was like when they gazed upon the chiropractic fragment. Could the nothingness which they saw before them be greater than anything else.

It Must Remain Deformed.

Chiropractic must always remain deformed. The moment they go to putting on the face, arms, chest, hips and legs, everybody will see its resemblance to its original. Now it is such a heterogeneous mass of unshapeliness that few unacquainted with its beautiful original, suspect it is but a left over fragment. Chiropractic has only one movement or punch in the back for all sorts of conditions of patients and diseases. I say "punch in the back" for we must rule out "adjust" as a misnomer,

when the adjustment is done that wild reckless way. There is a certain "method" in this "madness" which the general public is, of course, slow to perceive, but the trained osteopath can readily see why chiropractic cannot grow. If it really grows at all (that is, amounts to anything as a remedial agent) it must grow towards osteopathy, and that would immediately take the wind out of its sails, and keep the grist from the mill. Again, the growth into rationality, here intimated, would bring on legal complications in most states, for osteopathy as a system of healing, is now legalized in four fifths of the states. In other words the ignorance "innate" in chiropractic, is its protection.

Chiropractic Like Christian Science.

That seems a singular statement to make, that the bush whacking, "done by the hand" "Kiro," should resemble in any way the delicate refinements of a spiritual culture. Not so it is, at least, I think you will agree with me that there are points of analogy. Neither of them has any use for diagnosis, the art of differentiating one disease from another and of locating the cause, yet they accept the "diagnoses" which the patient brings with him and if he happens to improve while with them they, chiropractic and christian science, have cured the disease, (which they did not know existed, took someone else's word for it) and so advertise the "cure" to the world. Chiropractic does not ask, "What is the matter with this person?" neither does christian science, yet without knowing what is the matter, they both think they can locate the cause of the trouble. They both think they can remove this cause, the one with a thud, the other with a thought.

The Basic Principle Correct.

The contention that spinal conditions are responsible for most "diseases" or disorders of the body, most cases of chronic malfunctioning, is correct. This is fundamentally and eternally osteopathic, at the same time, to leave out, as is implied when using the figure of the beautiful statue, the twenty-four ribs and the two hip bones, with all the network of nerves interlacing them, to say nothing of the eyes, of diet, of climate, of infection, of mental influences, is to leave out a hundred or more factors, failure to consider which must often result in injustice to the patient and failure to bring relief. But looking at chiropractic from a purely physical standpoint it is a fatal omission that the important intercostal nerves and arteries were not considered worthy of inclusion. Osteopathy has proved that a twisted rib may cause serious abnormalities of the heart, of the breathing, of the liver, the spleen and the breasts.

Again to leave out the "innominate" or hip bones, what an irreparable oversight. Here again osteopathy has shown that subluxations of these bones, cause not only sciatic conditions but those more serious pelvic troubles of women and analogous troubles of men. But, as already stated, chiropractic is forever shut out from including these factors, for, to do so would inevitably make manifest even to the casual observer the beautiful original from which it keeps a safe distance. "Imitation may be the sincerest flattery," but annihilation is often the imitator's penalty.

The Chiropractic Crazy Quilt.

Have you ever been the guest, over night, on a distant prairie farm? The good housewife has shown your room and remarked admiringly of the crazy quilt which adorned the bed and to which you were invited to turn your eyes. You turned your eyes and your head swam, could you "believe your eyes? What was the mental condition of the good woman who put those pieces together? She must have been color blind. Joseph's coat of many colors was not "in it." You tried to sleep and "forget it," but you were not surprised when the nightmare woke you up and you saw snakes crawling all over the bed. You turned the quilt over the outside inside and made vain plunges into the arms of Morpheus. After a night of fitful slumber, you sprang out of bed at the first streak of dawn, dressed rapidly and left the room backing towards the door, keeping an eye always on that quilt with the outside inside for fear it might follow you down to breakfast. You closed the door and ran down stairs.

This is about the way the well trained mind, the mind that has been through a thorough course in anatomy, physiology and symptomatology, feels on being introduced to the atmosphere of chiropractic vagaries, incongruities, inanities. You feel that you are glad to shut the door on such a crazy piece of work, product of an immature mind, reeking with boastful inharmonies. By mentioning some of these the rational reader will see that I have scarcely overdrawn the picture. For instance there is the "ductus palmeri." This is supposed to be a duct leading from the spleen into the stomach and there discharging splenic juice (whatever this may be). It is presumably named after the fellow who thought of it, I do not say discovered. You can only discover a thing that has an existence. A real discoverer would have preserved such a phenomenon, but no such preservation was made in this case. If it was a genuine mistake then it can be explained by a tenderfoot in dissection, mistaking the splenic artery or vein for a duct. But let it pass, as it is passing and will soon be forgotten even

by chiropractors. They will be glad to forget it. It is one of the patches on the crazy quilt.

Another is the discovery of a serous circulation. It is too funny, otherwise we would be prompted to insert an I after the R. But we will take it at its face value. I asked the discoverer of this when he discovered it. He did not know but thought it was about two and a half years ago. Such an important and revolutionizing idea should have been recorded immediately and imperishably, but No, the discoverer had never seen it, yet he knew it was there, circulating around. It had a definite beginning and end, yet he had never seen either the beginning or end, it had a scientific purpose to serve, yet he did not know what that was. Well, I thought, this is a pretty big patch on the crazy quilt. It can be taken as typical of "Chiropractic Philosophy" and philosopher. Then again we are informed that the sympathetic nervous system, as such does not exist and that there is no such thing as reflex action. These denials could only be made by one who is unacquainted with the functions of the nervous system in health and disease, at the bed-side and in the laboratory. Denials of well established phenomena from a source that can claim the discovery of a serious circulation, with inability to give any information about it, are surely worthy of no scientific consideration, whatever. Such grotesque and empty assertions produce that tired feeling in the well informed. You exclaim "give me a foeman worthy of my steel," and so saying, in passing, you just touch the inflated chiropractic hoboe with your trusty sword (logic and things as they are) and it shrinks to its true portions.

Chiropractic's "Innate."

One of the great things in chiropractic is "innate." I do not mean that any great thing is innate in chiropractic. I tried sincerely to find something, as sincerely as Socrates looked for an honest man with the aid of a lantern, but had to give it up as no use. Somewhere in such old philosophy as Locke's or Bishop Berkeley's the "discoverer" discovered the word "innate." Presto, it was just the thing for the chiropractic museum of curiosities. It was trotted out on every occasion until the uninformed, who compose most of the chiropractic ranks, thought it was a heaven-sent revelation. It has always been a cardinal tenet of osteopathy that "nature tends towards the normal." This is what chiropractic just repeats by the use of the word "innate" in this connection. No simplification is attained by transferring this word from metaphysics to therapeutics, but rather "confusion is worse confounded" in the chiropractic mind.

The only things inherent in chiropractic are its ignorance and consequent limitation.

"Chiropractic's Fountain Head."

Those words sound very odd in connection with chiropractic "fountain" and "head." We are accustomed to associate beauty and knowledge with them. But let them pass as additional misnomers,— patches, if you will, on the aforesaid quilt. This "fountain head" is where the fantastic and baseless ideas, I have mentioned, are instilled into earnest but mistaken men and women. The place reminds me of a district school where the teacher has been called from the room. The professor in the chair is obviously playing at teaching, you can tell that by the ridiculous statements and attempts to correct the text book. As soon as the real teacher comes in this fellow at the desk will scurry back to his seat in the class. But no; nothing of the sort takes place, no real teacher comes to take the place of the "fellow at the desk" and on second thought you would not expect it, for you are in the class room at "Chiropractic's Fountain Head." So having a keen sense of the ludicrous, you accept the farce as an inevitable part of the chiropractic travesty. The difference between the professor in the chair and the members of the class is that they know that they ought to be in school only they have mistaken the kind of school.

Knowledge Not Necessary to be a Chiropractor.

The school of chiropractic is a continuous performance, that is you can join at any time. There is no graded course of instruction. It is like a 5c. moving picture show, if you stay long enough, the same film will come round again, and you do not have to stay so very long. The most ignorant man can become a skilled chiropractor in one month. It is a shameful waste of time to keep students there longer, if they are going to be practitioners of chiropractic. The discoverer of so many things that have not yet been seen admits with true logic that they do not need anatomy, physiology, diagnosis, etc. They do not need it and they do not get it. All that they need is the ability to see when certain points of bone along the spinal are in line, and then sufficient strength to adjust it after the manner already accurately described. In other words the equipment, the real essential equipment is similar to that of the Irishman at Donegal Fair, who was given a shillalegh by a friend and told to come along. "Phwhat shall I do with it" says Pat. "Phwhy," says the friend, "Phwhy Pat, wherever you sees a head, you're to hit it," so wherever chiropractic sees a spinous process out of line as com-

pared with the one above and the one below, he hits it, if he gets a chance regardless of previously recorded age, sex or previous condition of servitude to disease. Such shillalegh treatment has resulted disastrously for many patients. I do not wish to be unfair to chiropractic or any other method, but it is really a dangerous method, even with all the knowledge that can be got at "Chiropractic's Fountain Head." The outside clinic at this place is very poor, very limited. The students must resort to adjusting one another. The range of diseased conditions is accordingly very narrow. But then all diseases look alike (like the well known coons) to chiropractors. Still with such a training or lack of training the followers of this performance go forth to practice, chiropractic "done with the hand."

From Whom Does Chiropractic Draw Its Recruits?

It draws its recruits from several sources. Any new claimant to the healing art, will for a time draw recruits, if it only vociferate loud enough. Chiropractic has its megaphone. It is, however only pasteboard. A new claimant, or one claiming to be new, will attract those who are dissatisfied with the old way of doing things. Their dissatisfaction may be a true dissatisfaction, that is it may be the result of a thorough knowledge of the old and of its inadequacy. Or again it may be a dissatisfaction due to an imperfect knowledge of what the old can do. Again also it may be from no practical acquaintance with the old, like a party of school boys who would rather play truant than study. Chiropractic draws from the last two classes mostly. Any of the first class who investigate it soon see that it is a jumble of more fatuous fallacies than any they have already outgrown. They have just thought themselves out of the wood but now should they enter the meretricious mysticism of chiropractic philosophy they would indeed be in the jungle. Nothing can be more distressing to the rational mind than to have dished up to it, a mental hodge-podge. No one can advocate chiropractic who has had a thorough training in osteopathy. In fact I know of no one who has had a thorough training in osteopathy to give it up for chiropractic: to do so would be like turning one's back on a more or less rational world and entering an insane asylum, and you know if you stay in an insane asylum long enough what happens to you. However, there are some who study chiropractic, who, even though inadequately informed to begin with, are worthy of a better fate than this. They escape from the asylum as soon as they can. They are cured of what they went to get. They would make the best chiropractors if they would only not remain sane. But for their own peace of mind and future

progress, they have now become immune to the microbus impracticus. These are raw recruits, but they do not remain raw. There are some who were raw in the beginning and whose rawness increases to the end. So this cult without culture recruits by exaggerated misrepresentation and suffers by desertion of the better balanced as a consequence.

Who Are The Patients?

As to the "patients," they must surely have our sympathy. We cannot look upon suffering without wishing to remove it. We cannot compel a person to embrace this or that method. If they embrace that method which does not bring relief but which allows them to grow worse, then their suffering will be greater and the task of restoring them to the normal, more difficult when, by good fortune, they do come under the care of a method which can remove the cause of their trouble and which will leave no stone unturned that will carry them steadily and even triumphantly to the goal of health. Sufferers from ill health, like drowning men, will grasp at straws. It is human nature. But no sufferer is going to grasp a straw when a friendly hand from a life-boat is held out. The chiropractic straw plus a lively imagination and the inherent force of mind and body (facetiously yclept "innate") will support for a while, those who do not go down under the chiropractic thugging. The same can be said of christian science or of magsagnanism or any other oddity. But the osteopathic life-boat, manned by well-trained minds and alert bodies, and fully acquainted with the capacity of the individual to be rescued and also with the dangers of the "sea of troubles" into which he is plunged, will surely restore such an one to usefulness and the enjoyment of life. The victories of osteopathy on the field of disease and in the legislative halls of the country are the wonder of the medical world and the astonishment of the age.

What Will Become of it?

The future of chiropractic is not a matter that need occasion much speculation. No one but its "discoverer" loses any sleep over it. The fate of a concern built upon the noise of a loud-sounding, inharmonious megaphone is surely assured. It cannot grow without morally and legally going to pieces on the rocks. So, there it is, destined to atrophy and collapse. Such is the fate of all attempts at unwarranted usurpation—of all methods not founded on honest originality. If the conditions of growth are not inherent in a method, it cannot grow. Springing pyrotechnic and quixotic theories from an uninformed mind upon others "in the same box" is not a sign of growth but of frantic efforts

against the enevitable. So, to make a long story short, I have examined the chiropractic subluxations, and, I think, adjusted them—that is, put them back where they belong. In chiropractic there is no examination, but another misnomer, namely, “analysis,” is patched on to the quilt. Analysis, means to resolve anything into its original elements. Such a word cannot be rightly applied to a spinal examination, even if it is “hand-done.” But, I believe I can safely claim to have “analyzed” chiropractic, or, in other words, resolved it into its original elements. Chiropractic, pretending to a knowledge which it does not possess, has climbed a distance up the tree of knowledge, as already explained, that tree being the sturdy osteopathy, whose roots penetrate deep and wide. It has climbed out on one of the branches, saw in hand, and has sawn the branch off between itself and the trunk, falling into the stream below, it is carried swiftly over the rapids into the whirlpool where it sputters and flounders and disappears.

* * *

READ, THINK AND ACT.

F. E. MOORE, D. O., LE GRANDE, OREGON.

In the November Journal I note with interest that Chairman Heine, of the Legislative Committee, urges the various state organizations to elect their delegates to the Council on Legislation. This is a matter of great importance and should not be overlooked or neglected. The osteopathic profession can blame itself only if the matter of legislation does not keep abreast with the work being done by the older schools of practice.

More forcible than anything I can write, is the review in the American Medical Association Bulletin of May 15th, 1908, devoted to the work done by the Council on Medical Education of the American Medical Association. Medical education and medical legislation were the issues, the legislative discussion being devoted largely to the best method of controlling osteopathic regulation.

Is it not time for all osteopathic physicians to take an active working interest in promoting proper osteopathic legislation when the “regulars” from every state consider it worth while to devote much of their convention time discussing the best method of controlling the young giant? This information should be in the possession of all osteopathic physicians, so I herewith give the essential points.

First note who was in attendance.

Besides the members of the Council, eighty-eight delegates were present, representing twenty-one state examining boards, twenty-one state medical societies, three departments of the government services, two confederations of examining boards, two college associations and two national medical associations, as well as thirty medical and liberal arts colleges.

Observe the object of the Council: “The Council of Medical association is the instrument of the association in matters pertaining to medical education. Its functions are those of a national bureau of information. It seeks to collect the facts in regard to medical education in this country and abroad and to give publicity in these facts.”

At the conference last year a report was given showing the conditions existing in the 161 medical colleges of this country, based on personal inspection. On the basis of this inspection eighty-two schools were found to be of acceptable grade and thirty-two were regarded as worthless, leaving forty-seven which were regarded as susceptible of improvements which would bring them in to the acceptable class.

We know what “system” has done for the Standard Oil and other great enterprises. The A. M. A. is using “system.” Unable to legislate osteopathy out of existence they now propose composite board regulation and who is so flattered as to think for a moment that it is for the good of osteopathy.

As a matter of general information, read the following suggestions for medical practice acts:

The basic principles of a model medical practice act should be agreed on and adopted in each state. These basic principles should include. (a) A single licensing board made up of members irrespective of schools, the only requirement being that the men should be qualified practitioners of modern scientific medicine. (b) This board should have the power to determine the matter of preliminary education and medical curriculum and should have the power to refuse recognition to disreputable medical schools. (c) The preliminary education should be a standard four-year high school education, to which should be added in each state, as soon as conditions warrant, a thorough training in physics, chemistry and biology, including laboratory work. (d) A four year medical curriculum should be required, each annual session consisting of thirty weeks, thirty hours a week, the first two years to be spent in well equipped laboratories of anatomy, physiology, bacteriology, pathology and pharmacology, officered by trained teachers; the second two years devoted to medicine, surgery, obstetrics and the specialties in clinical work in well equipped laboratories dispensaries and hospitals. (e) When conditions warrant there should be added, to this, as has already been done in Germany, a compulsory year as a hospital interne. This last requirement will probably come without special urging, since in our better schools the majority of the graduates even to-day are convinced of the necessity of this hospital year and strive eagerly to secure it. (f) The state boards of each state should inspect its schools and refuse recognition to those who are not teaching scientific medicine. Then there should be a single association of state licensing boards organized, which should consist of delegates who are active members of state boards representing every state in the union; such an association should be of enormous service in handling such matters as the withholding of recognition of disreputable schools, reciprocity, etc.

In order to secure better conditions there should be an active, earnest co-operation in each state between the state licensing board and the organized medical profession; and the profession must see to it that the necessary laws are secured and that efficient men are appointed on the state board to see that they are enforced.

The report goes on with an extensive review of medical standards at home and abroad, has comparative dates as regards state regulation, college requirement, preliminary education, etc. Much of it is valuable information but I wish to call your attention chiefly to the discussion of osteopathy.

Doctor Beverly D. Harrison, of Detroit, Michigan, as Chairman of the Committee on “The Essentials of a Model Medical Art” in his report had this to say:

As a protection against the founding of new schools having the direct object of representation on the board, provision is made that a school, in order to be recognized in a state, must have active membership of at least fifty registered physicians. This would prevent the so-called “Osteopaths” from demanding school representation, as osteopaths are in no sense legally registered physicians. Neither are their schools, legally, medical schools. And yet we have the anomaly of membership on state medical boards of members of the so-called “Osteopathic” school, who are listed as examiners on purely medical subjects. It would seem little short of a disgrace that medical men should be condemned in law to submit to an examination in medicine by a person without any medical qualifications whatsoever. Supreme courts have, where the question has been raised, in unequivocal language, ruled that osteopathy

is massage, not involving the practice of medicine, and that osteopaths are masseurs. The excuse given by those in authority and responsible for medical laws in the states where osteopaths have been given membership on the medical boards, is that through this method osteopathy will, in the near future, become extinct. This would suggest that wrong is legalized in order that good may result, and savors strongly of the disposal of the proverbial "mess of pottage." It is a matter beyond dispute and within the exact knowledge of every intelligent man, that osteopathy is a rank fraud, notwithstanding the fact that it has been successfully launched on the American public and has obtained a legal foothold in a majority of the states. It would be much more consistent and meritorious to have as a member of a medical board a so-called "Optometrist." If any doubts exist relative to the status and the merits of osteopathy, Judge Toney's decision in a Kentucky case should be read. Doctor Still, the inventor of this system of "humbuggery" as late as December last, describes osteopathy as follows:

One of Dr. Still's definitions of osteopathy is given in full with the subject.

Now What, Really is Osteopathy?

Dr. F. Dudley Tait of San Francisco, a member of the state committee, among other things, said:

Graduates of all schools must be admitted to examinations for licensure. Properly administered, our present laws are perhaps adequate to control the output of medical colleges, but while medical men and learned societies have been discussing entrance requirements and college curriculum the fraudulent extra-mural elements—osteopaths, naturopaths, chiropractics, etc., have gained recognition in twenty-seven states. In some states the matriculants of a single osteopathic institution greatly outnumber those of all the medical schools of the state. In the face of such facts one is justified in asking if the organized medical profession of this country can have been true to either itself or the people. The remedy, in fact, the only radical remedy, if we may judge from the experience of Colorado, California and New York, is the establishment of a single composite board, the details of which have already been outlined by Dr. Harrison.

In 1901, in order to secure a composite medical examining board in California, we were compelled to give the osteopaths an examining board of their own, which, within less than six years, issued over 900 licenses, i. e., almost as many licenses as were granted by the medical boards during the same period. In 1907 we remedied this frightful evil by securing a single board on which osteopaths were given representation, all applicants taking the same examinations. Thus the cheap door, the short cut to the practice, has been definitely closed in California. All the osteopathic applicants have failed most miserably at our examinations, while the standard of these examinations has been considerably raised by one of the osteopathic members who examines in anatomy. My excuse for referring to the conditions that prevailed in California is the inaccurate description of such conditions which was given on the floor of the conference last year.

Dr. R. C. Coffey, one of my associate members on the Oregon Medical Board has this to say:

I want to mention one thing in regard to osteopathy. Dr. Tait has given you the experience of California. About four years ago a member of the legislature from Washington proposed a like bill for the state. It was defeated. We fought osteopathic bills in Oregon until last year, when two of our doctors in the legislature secured a bill as Dr. Tait has suggested. The consequence of that we are sending all our osteopathic applicants over to Washington.

As he remarks, we fought through six years for the independent board refusing all else, only to have forced on us by the medical doctors in the legislature our present law. The statement that the osteopathic applicants are going over to Washington is news to me, as two osteopathic physicians passed the last examination.

Dr. S. D. Van Meter of Colorado followed Dr. Coffey, saying:

As to the control of osteopathy, I have watched Oregon and Washington and California with great deal of interest. California thinks she has solved the problem

and I think she has shut the door, but before doing so 900 osteopaths got through it. Dr. Coffey is sending them all to Washington. I think that the solution of the question of handling the osteopaths and the magneto therapy people and all the brands of charlatans is to allow them to come up for examination. Make the board a non-sectarian board. I know that Colorado is free from sectarianism as any state in the Union. We have a composite board, but not by statutory provision. The osteopath in that state is on the level with the masseur. Under a recent court decision, he is not permitted to use the title of Doctor or M. D., or represent himself as a physician, and I want to say that that absolutely prevents any man from carrying on his profession. If a man cannot represent himself as a physician, he might as well move to other quarters.

A Member—Can he not call himself an osteopathic physician, doctor?

Dr. VanMeter—No he cannot call himself an osteopathic physician or anything signifying that he takes care of the sick, and can not represent himself in that capacity.

Next came Dr. A. Ravogli of Cincinnati, Ohio:

The State Board of Ohio has a great deal of chicanery to deal with. In the school at Kirksville, Mo., the osteopaths call themselves physician, and they claim they are practicing the actual healing science. In Ohio, they come out and call themselves "nature physicians." They claim they are not using any drugs, but are simply limiting themselves to kneading and tapping the body. This is entirely false, because I have seen all the catalogues of the Kirksville school, where they speak of obstetrics and different genito-urinary diseases. In Ohio they are required to present the same evidence of training as any other physician and not resort to this method of chicanery. In Ohio we avoid having a separate board of osteopaths by a compromise. The legislature has given the Ohio board power to select three osteopaths as a consultation committee. Their duty is to recommend to us who are capable and, in their opinion, good osteopaths. After the recommendation of this committee the candidates are subjected to an examination in anatomy, physical diagnosis and physiology, and if they pass they are allowed to practice, but are forbidden to use or prescribe drugs. Last year only five or six osteopaths came up for examination. In this way I think we have solved the problem, at least for the present.

Dr. Arnold of Massachusetts spoke in part as follows:

Another point of interest to me was the difficulties some of you have had with osteopaths. Now, the trouble is not so much that he is an osteopath as it is that he is not properly educated. Some of you have tried to remedy that, and have failed. This very matter of being one of the states that do not require graduation from a medical student has been one point of safety in Massachusetts in dealing with the osteopaths. We say to them: We don't require you to graduate from a first class medical school. We simply give you a broad, general medical examination, and if you osteopaths are qualified, you can take it, and so far, we have kept them out on that basis.

The next point I want to speak about is the work that has been done by the committee on medical education of the Massachusetts Medical Society. We have decided that in view of the present state of mind of the legislature and the public, it is inadvisable to try to change those laws, bad as you may think them. Going to the legislature is like handling a two edged weapon, and you may want to be sure that you have the handle in your hand. We have decided rather to see what can be done with our present laws, and we are very hopeful. We will be able to incorporate a practical examination of the candidates to be licensed.

Following what Dr. Arnold had to say about the necessity of favorable public sentiment, observe how Dr. J. McPherson Scott of Maryland emphasizes it. He says:

You can get nothing from a legislature unless public sentiment demands it. If you cannot get the general public to stand with you, you are not going to have success with the legislature.

Dr. James S. Egan of Illinois gloats over osteopathic restrictions as follows:

Let me say a word in regard to the osteopaths. The gentleman from Massachusetts speaks of the ideal conditions found there. They license the osteopaths as physicians. We have a provision in our medical practice act providing for examination and registration of those who treat without the use of drugs and surgical opera-

tions. We have examined and licensed during the past nine years about five hundred so-called "other practitioners," 90% of whom were osteopaths. We gave them an examination in anatomy, physiology, chemistry, histology, hygiene, and symptomatology, the same as other physicians, and licensed them as practitioners, authorized to treat without the use of drugs or surgical operations. In Illinois we have solved the problem of osteopath. No longer can the osteopath come before the board and say that the board does not recognize him. They can practice in this state if they pass that examination. They are limited in their practice. They can not even use the X-ray. They simply must practice without the use of drugs and surgical operations. I think you will have to look to Illinois for your solution of the osteopathic problem.

Dr. Tait.—May I ask if any of the 500 licentiates of the Illinois board have ever been prosecuted for practicing medicine?

Dr. Egan.—We have never had occasion to do so. I do not know that in the last nine years we have received more than one or two complaints from physicians or others that the osteopaths were practicing medicine.

Dr. Tait.—The osteopaths all over the country do practice medicine. They use drugs and the knife.

Dr. Egan.—That does not obtain in Illinois.

I hope and pray that Illinois may win an independent board law.

Dr. W. T. Sarles of Wisconsin closed the discussion as follows:

We will have to decide what constitutes the practice of medicine. Two-thirds of the trouble comes from these "isms." The legislatures have got to decide just when a man who treats the sick is doing a professional duty, and the sooner we get together as boards and decide how we are to treat these different "isms" when they go about treating people and claiming they are doctors, the better it will be.

I trust this declared medical attitude may awaken osteopathic enthusiasm for the independent board. The fact that a National Medical Conference decides on the composite board as a means of osteopathic limitation with the hope of final elimination should be reason enough to make a Council on Legislation at our next annual convention a necessity. Let us all work for independent boards.

—A. O. A. JOURNAL.

* * *

OSTEOPATHY AND ITS TROUBLES.

(From the viewpoint of a layman.)

That there are several factors, or conditions connected with the osteopathic profession which places osteopathy in the position of "there goes Bill comin' back," is plainly evidenced by the keynote of alarm sounded by Dr. Wm. Smith in the November Journal under the caption of "Osteopathic Race Suicide." And which inspires the writing of this article.

As an apology to those who may think it presumptuous for a layman to undertake to tell the profession its faults; will say that I became interested in the science of osteopathy seven years ago and seriously considered the matter of taking it up as a life vocation. With that in view, I started to investigate it. My duties as a traveling man brought me into many states, I took occasion to visit the Kirksville and Des Moines schools. Also visited a large number of practitioners throughout the country. Have been not only a close follower of osteopathic literature, but also that published in opposition to it. Anything said or written against osteopathy has not tended to shake my confidence or belief in it, but my reason for not being an osteopath to-day was found in the precincts of the profession itself.

Suffering From Jealously.

The profession is suffering from a condition of jealousy and selfishness that is sapping out its vitality. It is its own worst enemy. Why this is so will be set forth hereinafter. What the profession needs, is to be placed on the treating table and given the kind of a treatment that will cause pure and unadulterated osteopathy to flow through its system. When it practices in its purity, what it professes it will then maintain a dignified place, not only in the opinion of the public, but also that of its opponents.

Permit me to qualify by explanation what I wish to convey by jealousy, selfishness and impurity in the practice of osteopathy. It is easily apparent to any one who will take the trouble to observe that the graduates, (as a rule) of one school look upon those of any other with contempt and as being hardly worthy the name of "Osteopath" especially is this true of Kirksville student's feeling against other schools. Nor is this feeling of jealousy directed entirely against other schools, but is found to exist between members of different classes of the same schools.

Two Rival Practitioners.

To illustrate the last assertion; the writer called upon an osteopath who was located in a little city in southern Michigan. A graduate of the class of '01 or '02. Had been practicing about three years. For convenience we will call him Dr. Smith. I explained to the Dr. that I wanted to know something about osteopathy as I thought seriously of taking it up. He readily volunteered to give me all the information he could, and proceeded to do so. Told me of his pioneer efforts in that locality; that he had been monarch of all he surveyed in his line until recently when a "Dr. Jones" a graduate of the same school about three years later had the temerity or nerve to locate in the private domain of Dr. Smith, when he ought to know that there could be only a comfortable practice for one osteopath. If this Dr. Jones had used decent or dignified methods of announcing himself to the public and not have dragged Dr. Smith's practice into disrepute, the conditions would not have been so bad. Jones was doing nothing himself to speak of and Dr. Smith's business had suffered a bad decrease.

"What did Jones do?" was asked. "He announced himself by flaring newspaper ads. Circulated promiscuously cheap hand bills and proceeded to make himself shockingly conspicuous, which has brought down ridicule on both himself and his profession. Dr. Smith told of the following incident to illustrate his grievance. "There is in this town a dry-goods firm, H. H. Jones & Co., who were having one of their periodical sales at the proverbial slaughter prices, simultaneous with the issuance of the H. Jones, osteopath circular. There also happened to be a lady in that town who had never had occasion even to hear of osteopathy. So having received one of the doctor's circulars and also desiring to take advantage of the low prices at Jones & Co's, after other purchases, she asked for a package of osteopathy, saying she thought they would look so nice planted on each side of the path in front of the house, (not having read the circular). The clerk being wise, said they were just out of osteopaths, but recommended something else that would look just as well." (Such was the story, but I could not quite get it through me how she expected to get something to plant from a dry goods house).

The Other Side.

After getting enough information from Smith to give me a bad impression of Jones, I went to the latter's office, where a young man of perhaps twenty-eight or

thirty, introduced himself as Dr. Jones. I was surprised to find a man of particularly fine appearance and cultured address, who had been a college professor for a number of years before taking up osteopathy. Upon learning my mission, he at once entered into a most enthusiastic and comprehensive explanation of the science, really the best I had ever heard. In answer to questions about his practice, he stated that he had been located about three months and was more than pleased with his business. (After hearing what I had, was naturally curious about his methods, which appropriate questioning brought out). In two of the local papers he ran a modest business card, containing name, profession and address. He had then about 150 journals (of some kind) ready for mailing, stating that he sent out several hundred each month. Also gave me a copy of a very neat little folder of about six leaves and cover, which explained in a concise manner what osteopathy stood for. This he said had been mailed to the head of every household listed in the city directory. (The cheap hand-bill). The annoying(?) thing about calling on a man like Doctor Jones was, our visit was interrupted four or five times by patients coming in to be treated, otherwise it was so pleasant that I was surprised that I had been in his office over two hours. When asked if there were any other osteopaths there, the doctor answered with a sort of yes-no. Yes in name, no in reality. "There is one here. Was here when I came, but he don't seem to be doing anything. No advertiser, no hustler, no mixer, not an up-to-date osteopath. Got his diploma when osteopathy was taught only in its crudest form, in the primitive days of the science. Most of the old timers are taking post-graduate courses in order to get the real thing we got."

I was not prepared for this last bit of information. I did not expect to hear such a "knock" from this clean, intelligent, broad minded young man, against one who had preceded him through the same school only three years (the A. S. O.) and against one who at least, had the advantage of three year's practice. Both professing the same thing. Both located in the same town. Both duly graduated from the same school. Both saying disrespectful things of each other's capability. Both striving to discredit the other in public opinion. Both, as it were, trampling the dignity of the science into the ground and neither realizing it. Is this putting it up to the public in a way that will make it prosper as a science? If you think for one moment that this is an isolated example and you will take the trouble to investigate, you will find this condition to be true in almost any locality where two or more osteopaths are located. Especially is it true where the rival doctors represent different schools. There are however, many pleasing exceptions.

Why the Three Year Course?

Even the laws promulgated by the state associations and passed by the legislatures are permeated by the essence of selfishness. These laws, in the form in which they were passed, under the guise of protecting osteopathy are in many ways barriers to its progress. How? The best way to discover some of their detriments, is to go into any class room of any of the schools, read the New York, Ohio and several other state laws and ask the students how many of them could qualify under these laws even after they have taken the three year's course. Many of the state laws are, of course, more liberal. Some of the associations were glad to get almost any kind of a law as a matter of recognition, which may afterwards be more easily amended and molded into more prohibitive measures, which if not so intended, do operate as barriers to restrict the influx of otherwise fully qualified osteopathic practitioners. For fear this method would not be sufficiently effective, the clamor for a three year's course

was set up. Was this from the public in order to secure more efficient service? No! Was it from the M. D's. to secure stronger and more ethical competition? No. Was it from the legislatures to compel a higher standard of service to the public? No. Was it from the osteopathic schools? The Journal says "the schools pled for just one more year in which to make the change." If not any of those, who then? To whom did the schools plead? It surely could not have been to three year osteopaths, so we must conclude that it was to two year term osteopaths who were more interested in the other fellow's welfare?—than in their own. This arrangement would cut "goin' and a comin' ". It would keep 'em back a year. It would keep a lot out of school altogether and it would close up most of the small schools that could not get enough students under the three year course to keep them alive. It has all worked, beautifully. It is one way to boost osteopathy—over the cliff. A three year course is unquestionably a splendid thing for the ones who may take advantage of its benefits, but was osteopathy ready for such a change? Events have certainly shown that it was not and has suffered as a consequence. Will the turning loose of a three year product in the field against, or rather in competition with the two year graduates be conducive of harmony? The things that have been said about each other will be tame beside that which is to come.

The Adjunct Evil.

One time I was in a western city and having some leisure time, went to visit an osteopath. Found the desired sign on a second story window of a very nice block. Mounting the stairs, passed into a door that bore a similar sign to that on the window. Was about to back out thinking I had made a mistake and was in the city electric light plant machine shop, but the chief engineer in charge, on finding out what I wanted, assured me that I was in a real osteopathic physician's office and he was the doctor. After the usual preliminary of making my desire known, the doctor was delighted to show me all the "appliances of osteopathy" and proceeded to explain the merits of his electric light cabinets, thermal ovens, regular bath tubs with electric attachments, massage machines, pedestal electric vibrators, block and tackle swings, etc., also of course, the regulation tables. Here the patient could be lit up, warmed up, soaked? (possibly "soaked" should be used last), shocked, shook, buzzed, vibrated and otherwise—treated. Amazingly complete. When the writer was in Kirksville he thought he was shown everything from cellar to garret, but somehow missed the machine shop. A large percentage of osteopaths use these mechanical adjuncts. To be sure, not to the extreme just described, but there are few that don't have mechanical adjuncts of some kind. What the public don't understand and wants to know about, is why all the literature circulated by the osteopaths describes only the wonders of Stillosteopathy, that they are nearly always given machineosteopathy. Is the latter better? If it is, why not teach it as well as practice it? When osteopathy has shaken from its own skirts the elements of fakism, it will be better qualified to call the chiros and mechano-therapists, etc., fakes. Whether they are or not the writer does not pretend to know. My only information about them has been gleaned from osteopathic papers and from which I surmise, is a real or imaginary danger on the trail of osteopathy.

How the Spurs May be Won.

Where does osteopathy stand as a system in comparison to others? I won't say "science" for the reason that a member of one recognizes only his own as a science. The medical system is hundreds of years old. It has about 130,000 practitioners

in the U. S. (according to M'Cormick). What is its following. Millions. Christian science system, whose founder still lives, has been placed before humanity in a way that must be convincing; or it would not have over fifteen millions of believers and followers. (Something like five and one-half millions in the U. S.) This is a system where religion and suggestion is dealt with. In the practice of medicine, suggestion is again found to be a potent factor. We find many advocates of mental suggestive therapy without any trimmings. It is a thing which is wholly ignored by the osteopath who claims a complete system of healing by dealing only with the physical man and ignoring the both the spiritual and mental man. How well have you been able to convince "many men of many minds" that you are right? You have about 5,000 practitioners. What is your following? You have but to read the writings of your own members to appreciate the difficulty with which they make the public understand what osteopathy is and what its benefits are. It is not because of public ignorance, for is it not the essence of the opinion of this same public that feeds the vitality and molds the character of the Nation of which we are so proud? Osteopathy is but a child—too small to assume the role of "Jack the giant killer." It must remember that old Giant medic has lived to see scores of would be "Jacks" batter out their tender brains against his armor. It is too small as yet to say that noxious weeds shall not grow in its pathway, in imitation of itself. It is too small to say to the public that it is a fool to entertain beliefs that do not encompass the principles of osteopathy. It must win its spurs and shield by the practice of Simon-pure Still-Osteopathy. Cast into a heap its adjuncts, egotism, selfishness, jealousy and burn them all up with the fire of brotherly co-operation and enthusiasm. Then and then only, will true osteopathy live and prosper in an atmosphere and an environment to which so great a science is truly entitled.

Humbly submitted by,

Warren, Pa.

W. R. ARCHER,

* * *

INNOMINATE LESIONS.

O. W. LA PLOUNT, D. O., PORTAGE, WIS.

I think there is no particular lesion to which the osteopath can give special study with more gratifying results than that of the sacro-iliac joint. There are no lesions in the body that will produce more far-reaching anatomical and physiological derangement, than those of the ilium with the sacrum. But realizing that there are a great many here whose experience in dealing with this class of lesion has been much broader than my own, and believing that it would be the desire of those present to base ideals of action upon clinical facts rather than finely drawn theories, I wish to state that my record during the past year on innominate lesions, 187 cases. Of this number, thirty-two had lateral spinal curves with rotation and compensatory curves, and forty-two with marked rotation of the fifth lumbar upon the sacrum. They also suffered from pains in the knee, sciatica, synovitis, etc. Forty-five had lateral rotation at the eleventh dorsal with no other visible mal-adjustment of the spine. (The lesion at the eleventh dorsal was secondary to the innominate lesion) fourteen of the forty-five had appendicitis, and in the remainder, disturbances of function in every part innervated by the eleventh dorsal. Were the fourteen cases of appendicitis, primary, secondary or tertiary to this lesion?

Sixty-eight of the cases, women, had disease in the pelvis on the same side as the lesion. Nine of this number had pyosalpinx on same side in relation to lesion. One

of the nine was operated upon by laparotomy and died; all other cases were cured by adjustment of the lesion at once, with appropriate accessory treatment.

As it is well known by master mechanics of our bodies, there may be disturbances of function in any part innervated by the sacral plexus of nerves which may be either a vaso-motor, trophic, sensory or secretory disturbance. It may be that the disturbed function is in, or around the plexus itself, or in the peripheral branches of nerves leading from it. We may as all of you know, have direct or reflex disturbances in any portion of the nervous system from this lesion. By reasoning from cause to effect, we can say the innominate lesion is one of vast importance to us as physicians.

Again notice I have recorded forty-five cases with upward and backward rotation of the innominate, with no visible disturbances of the spinal column, except a lateral eleventh dorsal. It is lateral as though the entire spine above this eleventh dorsal was turned to one side, while the balance of the body and spine was turned the other way. You all know that this point is more movable than other points in the spine, having a thicker cartilage. The motion of the eleventh dorsal is quite marked since the ribs do not articulate with the processes. This vertebra is often subluxated, due to its being located at this movable point. (This is so because the lumbar segment of the spine is comparatively rigid and the dorsal area with its ribs attached makes a solid body pivoting at the eleventh dorsal.) As a result of this secondary lesion you have inflammatory diseases of the ovary, small intestines, vermiform appendix, ureter, cecum and peritoneum. There may be pain referred to any point innervated by the eleventh dorsal.

My opinion after the study of innominate lesions and curvature of the spine, is that most of the spinal pathological curves find their starting point in the short limb which is primarily due to a luxated innominate upon the sacrum. We find all sorts of abnormal conditions caused by this innominate lesion, i. e., the short limb, causing curve with rotation in the lumbar area, a compensatory curve in the dorsal and another in the cervical. The compensatory curves, the depressed ribs on the same side as the lesion with perhaps carcinoma of the breast because of the ribs impinging upon arteries, veins, nerves, etc., located there. Again, the headache and other disorders caused by subluxated atlas, and many other pathological conditions traced to this defect.

I adjust this lesion at once, doing no preliminary treating in any case as we cannot strengthen this joint or its ligaments until the cause of the disorder is removed. After removing the cause I then look to the effects and treat them if it is necessary. A great deal of judgment must be used in all cases in adjusting the joint. A very large per cent of these lesions can be definitely and permanently corrected and thereby curing a large variety of disturbances about the abdomen, pelvis, and limbs.

Most writers state that some few of these lesions can be corrected at once, but that a greater number require a longer time for treatment. I wish to reverse the statement made by others. I correct all these lesions, or a large majority of them the first treatment. The technique to be used in adjustment will be governed by the kind of luxation, also characteristics of the patient. In no case have I injured a patient in any way when making this correction.

Realizing that the time limit is short for such a broad subject as innominate lesions, I have written but these few words and as I did not wish to burden you, I have omitted the anatomy as it is something with which you are all familiar. I have also left out any long theories as I wish to stimulate thought on practical lines,

and I will now undertake to demonstrate to you how I diagnose and adjust this pelvic twist.

(Dr. LaPlount then spoke of the different methods for correction of the lesion with points on diagnosis, many of which were familiar to most of us. He then described the technique of one easily performed adjustment):

Lesion posterior innominate on right side of patient. Patient on the table in dorsal position. Operator stands on left side of table, right hand on right shoulder of patient holding it firm. Left hand fixes patient's right leg, bringing it straight across toward operator with a comparatively light downward pressure towards the floor. A little quick thrust opens up the sacro-iliac joint of the right side. At the moment of full downward pressure, the knee is suddenly straightened and the innominate is corrected. After correction it should be watched from time to time to see that it remains in place, and each time treated to maintain normal motion in the joint. (Read before W. S. O. A. and printed by request.)

* * *

OSTEOPATHY ROASTED AGAIN.

WITH THE AID OF A MAN WHO IS IN THE MISSOURI STATE INSANE ASYLUM,
DR. THRUSH OF PHILADELPHIA, WITH THREE ASSISTANTS,
DELIVERS US A DEADLY BLOW—ON THE WRIST.

GEORGE A. STILL, M. S., M. D., D. O.

Probably most of my readers will recollect the scene in "Way Down East" where the local news is being discussed, while one of the players is reading the "Martinsville Weekly Journal," and one of the auditors asks if a certain "news" item is in the current issue of the "Journal" and then when he discovers that the event occurred only a month ago, remarks philosophically, "Oh well, it ain't had time yit to git in the Journal." In real life we find this rural joke repeated, much magnified in the Journal of the American Medical Association for December, 1908, where, just about thirty-five years later a man named M. Clayton Thrush, assisted by Alexander S. Von Mansfelde, John Kercher, and R. A. Lyman, informs the news-hungry medical public "What Osteopathy Is."

But this is to be expected, in a Journal that within a few years devoted considerable space to an article "proving" that the blood and pulse in the umbilical cord at child-birth, belonged to the foetus.

Not Everything Written by Osteopaths is Osteopathic.

Of course it is not entirely the Journal's fault, as they have to publish anything read at one of their meetings and, to get nearer home, the Journal of the American Osteopathic Association publishes some pretty rotten stuff, occasionally, and I have also seen articles in the A. S. O. Journal that caused a feeling of nausea. In fact, if any science, even mathematics, had to stand by all of its literature, it would cease to be a science. We cannot blame mathematics as such, because according to the non-Euclidean geometry, so ably discovered by two of Max Nordeau's subjects a few years ago, straight lines form circles and parallel lines meet or digress, just as the individual with the anesthetic fauces and the inverted color field chooses. In spite of this, real mathematics is as correct as ever in getting four by adding two and two.

But I digress: The Editor has asked me to "answer" Dr. Thrush's article. Last

month he published the article without criticism or comment, in the "Wit and Humor Department" of the Journal of Osteopathy. As a joke, it has made a great hit, but our English friends, of whom we have several, demand that the joke be dissected for them, for fear that of the large number of sub-divisions in it, and on account of their natural shortcomings, that they will overlook a few of the funniest parts.

Dr. Thrush states, according to his article, that he presented it for three reasons, and that the first one was, "To show in a concise way what osteopathy really is, and what constitute its important principles," and then in the following sentence in the same paragraph, he states the amount of his "concise knowledge of these important principles" in the following words: "I have talked with many physicians on this subject and none of them could give me 'anything like a satisfactory explanation of the claims of osteopathy.'" Really, would an osteopath be considered fair, if he went for information regarding the true teachings of pharmacy, or any allied subject, to men who could not give anything like a satisfactory explanation of the subject?" Either they would not be fair, or not rational, and it would be similar dishonesty, or irrationality, to quote books in discussing medicine, that were mentioned in no medical catalogue in the world, as either text or reference.

Dr. Still Offers, as a Medical Graduate, to Explain Osteopathy.

Now, if Dr. Thrush or the Journal of the American Medical Association really wishes a concise statement of what osteopathy is, I will now make public an offer which has been formerly made, and refused, by letter, to furnish the medical profession with an article containing such concise information, allowing the editor to censor any part of it that seems personal or discourteous in the least. In addition, I challenge Dr. Thrush to answer that article in a subsequent issue of the same Journal, allowing me just one-half his space in a still later issue, to close the argument, and allowing the medical profession to judge the debate. I know they will be entirely unprejudiced in the matter as neither Dr. Thrush nor myself represent the average medical view of to-day.

I represent, rather radically, the views of men of modern non-drug medicine, like Osler and other big men of the profession. He represents radically, the views of mediaeval all-drug therapeutics. The general profession stands as an average of these views.

On the other hand, I am willing, as a member of the faculty of the Original School of Osteopathy, and a relative of the founder, to furnish the Journal with such an article without following it by a debate, if an honest statement from some one who does have a "concise view of the really important principles of osteopathy" is desired. In other words, if either the individuals, or the Journal, as such, wish a statement from a man who has studied both medicine and osteopathy, and has practiced both, they can get it, but I do not believe they care for such an article. They show this, when admitting that their sources of information were from physicians, none of whom could give anything like satisfactory explanations, and again, when they quote an insane man in their discussion, as an authority for their arguments.

Quotations From "Authorities" in Insane Asylums.

Personally, when I wanted to know just what medicine could do, I went to the best medical school I could find and took the course, and one of the most valuable things learned there, was that modern allopathy is no more all drugs, as Dr. Thrush would have us believe, than that osteopathy is all centered in twenty-one manipu-

lations, as he would also have us believe. True, I didn't attend medical school just to write an article on medicine, but had I wished to write an article on medicine, I would at least have gone to somebody who knew something about it, to get my information, and I would have tried to overlook insane asylums in gathering "honest" data.

The idea of quoting as authoritative, the statement of a man who never taught in any osteopathic school, whose book is mentioned in the catalogue of no osteopathic school in the world, either as text or reference, whose book is not obtainable or even quoted by the leading osteopathic book dealers, and who, in addition, unfortunate man, is an inmate of the State Insane Asylum, just as is many an unfortunate medical man in this and other institutions.

Reliability of Drugs a Totally Minus Quantity.

Really, I believe that the pharmaceutical division of the American Medical Association is the only organization in existence where the statements of some paranoiac or similar unfortunate, could be used and accepted in proving or disproving an argument. In most organizations an individual using such material would be ostracized, and though we are all human, of course, and even osteopaths are sometimes radical and sometimes mistaken, yet, I do not believe that such an excessive amount of unfairness and splenic enlargement could be found outside of the organization mentioned. If one has not read this article in the American Medical Association's Journal, I will state that the individual to whom I refer, and whose definition, etc., they quote as representative of osteopathy, and as Dr. Kercher says, "assumedly authoritative," is the unfortunate W. F. Harland. It is to be wondered if this quartette of drug specialists get all of their information from the insane asylum. One would judge so, if one merely would read the article preceding the one about osteopathy, in which the same men prove conclusively that the average drug, as obtained by the average physician to-day, has no value, in that the standards of the drugs under the most exacting circumstances, are absolutely uncertain.

What rational group of individuals would continue to stand by a system which, after thousands of years of existence, admits through its self-confessed authors, that the entire system is based upon inaccuracies and errors?

Half or Incorrect Quotations Cited.

Not satisfied with quoting as authoritative, statements from an individual in an asylum, the article goes ahead and distorts statements or gives only partial quotations and such confusing evidence from the works of authors like Hazzard and Hulett, who in their time have written some very clever work. But even, in these cases, the lack of desire to get the most modern views on osteopathy is shown by the fact that Dr. Hulett has been dead five years and his book is necessarily, not the most recent work on the subject, while Dr. Hazzard has neither been in school nor in school work since a few years after the first osteopath was graduated. This is no criticism of the books, but merely shows how careful this pharmaceutical quartette has avoided quoting anything from any one actively engaged in the teaching of osteopathy at present, in spite of the fact that there are many recent articles on the subject by men who are now teaching. True, there are no complete books on the subject, because the science is not old enough to be completely written up, any more than the medical science is completely printed, in spite of its many many centuries of existence.

Treatment of Gangrenous Enteritis.

For an example of a garbled quotation from Dr. Hazzard's book, the ideas presented by Dr. Thrush about the osteopathic treatment of gangrenous enteritis is highly amusing. Let me ask if any one who ever studied osteopathy, or even took an osteopathic treatment, has in his whole life, seen or heard described, or believes that any osteopath ever did give, teach or read about a treatment for gangrenous intestine from obstruction, in which the patient is seized by four men, one to a limb, and then flailed up and down over a bed, like beating a salted hide on a barrel, and yet, this is calmly quoted as one of our treatments.

Thirty-Five Centuries of Medical Un-Science.

It is true that Hazzard does describe a treatment which does require four men, but it is not recommended in any condition of the abdominal cavity or anywhere else where it could do harm. I will add, however, that at the present date, no four-man treatment is taught at the American School of Osteopathy, and that if the politicians of the A. O. A. will allow the A. S. O. to choose its own text books and to teach osteopathy as directed by A. T. Still, no such treatments will be taught.

Dr. Thrush's article spends its first column on pre-oration and no arguments are made, but it is significant, as mentioned before, that the page on which the article about this thirty-five year old science begins, also contains the ending of a discussion by the same Dr. Thrush, and his assistants, in which they admit that their drug science with nearer thirty-five centuries to its credit, is still so uncertain that even under ordinary circumstances one has to have a test made to know whether a drug purchased at a drug store, really contains the active principle that is supposed to make it valuable, and yet, with their usual rationality, the same argument wastes considerable time in roasting to a turn, the very people who insist on active principles alone, in treatment of disease, i. e., the alkaloidal votaries. They are called down real hard for finding active principles in such plants as the Cactus Grandi-flora, when Dr. Thrush could not find them.

"Erroneously Called Allopathic School."

Actually, if one will carefully read any one volume of the A. O. A. Journal through he will see that there is no more difference of opinion between any M. D. and any D. O. than there is between the different sects of M. D's. themselves, and that medicine, taken as a whole, is the most self-confessed, mixed up, confused and jumbled science in the world, in spite of these centuries of possible advancement, if there had in the beginning been anything in general drug treatment to advance.

To return to the article, we are informed after the pre-oration, that the name of osteopathy is incorrect and should be changed, but this argument against the steopathic treatment of typhoid fever is rather weakened when in the next paragraph the Doctor also speaks of "the erroneously called Allopathic School."

Following this anti-climax, we are informed on Dr. Thrush's own authority, that the founder of osteopathy practiced medicine only a "few" years, when the facts are that in 1874 he had been practicing it already for twenty-one years, and incidentally, was a surgeon in the Civil War.

Separate Osteopathic Examining Boards.

Two columns are now given us on the subject of the insincerity of the osteopath in his desire to have a separate state examining board, because we are told that a medical

board of six to a dozen members with one osteopath on it would give the osteopaths in general, a square deal. Just imagine Drs. Thrush, Kercher & Co., on a medical board the night before examination, and also the night of grading the papers, and imagine if you can, the size, shape and consistency of the "square deal" they would fix up for any one who wanted to practice osteopathy, under their jurisdiction.

Modern Ideas on Bacteriology.

Another column is devoted to scolding the osteopaths for teaching bacteriology and then saying that "these germs are not the only factors in disease." I judge by referring to Dr. Thrush's alma mater and the date of his graduation as given by Polk's Medical Register, that there was very little taught about the germs there, when he was turned loose, and that since then he has been too busy standardizing drugs, criticising the alkaloidalists and studying osteopathy, to read what modern bacteriologists and medical men really believe about germs. I would recommend to the good doctor and his friends, that they read a late edition of some good pathology and also a modern bacteriology and then some good work on practice, like Osler or Edwards. I am positive that the physicians with whom Dr. Thrush is associated are as little conversant with modern medicine as they are with osteopathy.

All of Osteopathy Learned From One Treatment.

One of the richest points in this article, however, is when we are told that the learned doctor discovered just what the "classical manipulations" of osteopathy consisted of, by taking one treatment of a teacher in the Philadelphia College. How is this for "research work?" I am now consoled for some of the trash labeled "Research" that has appeared nearer home. Amongst other things discovered during this treatment, was that "the offices even in the country towns are usually attractive and handsomely fitted up." Cheer up Seniors!

The time required for a treatment was also accurately determined, i. e., from "ten minutes to one hour." We judge that this includes conversation.

Office Treatments Recommended for Pneumonia and Typhoid !!

It looks impossible, and I would not believe it if I had not read it the second time, that Dr. M. Clayton Thursh, Ph. M., M. D., of Philadelphia, actually says in the first column of page 2138 of the Journal of the American Medical Association of December 19th, 1909.

"Osteopathy will never interfere to a great extent with medical practice, as the great majority of the patients are treated in the offices for conditions that allow them to be around, and if they are really sick with some acute disease, a regular practitioner is called, so that osteopathy is a sort of gymnastic, as it were, and not invoked as yet for illness which regular practice confronts. Thus we have a clear conception of what osteopathy really is and stands for as stated by the leading authorities of their school."

Without stopping for breath and without a thought of the absurdity of the thing, he continues in the next line as follows:

"Now let us consider the relations between osteopathy and the various branches of medicine, remembering that they treat all these affections solely by manipulation, as they are opposed to the use of drugs in the treatment of disease. The osteopath represents himself as a competent clinician and treats all the various medical diseases,

including the acute infectious diseases, such as typhoid fever, tuberculosis, malaria, pneumoniam," etc., and then he goes on for another column and a half, naming nearly every dread disease that man is heir to, resuming and summing up and repeating, at the end, saying, "they even treat pneumonia, typhoid, tuberculosis, nephritis, small-pox, etc." I wonder if the editor of the American Medical Association Journal ever edits his articles before letting them pass. It seems incredible that such contradictions could be written, read, discussed and published, unchanged.

As to Anatomy and Physiology.

We are also informed incidentally, that the osteopathic schools teach, "especially anatomy and physiology erroneously:" this is possibly true, as in these subjects no attempt is made to teach them differently from what they appear in the medical texts, our object being only to learn them better than the average medical men.

Conclusion.

This remarkable article then ends by again scolding the osteopaths through two columns, for wanting separate State boards. Including the arguments given for this scolding this is altogether the most remarkable article I have ever read in any supposedly scientific journal. The only thing that I ever saw that even rivalled it, being a series of five articles that appeared a few years ago on the "cure of cancer."

P. S. Of course no offense is intended toward Philadelphia, but it is well to remember that it is the home, not only of Dr. Thrush, but also of Dr. Wiley who made such a hit as an expert witness in the Thaw trial, a year ago. G. S.

* * *

A RARE TYPHOID COMPLICATION.

DR. EDW. ADAMS OF DODGE CITY, KANSAS; AND DR. GEORGE A. STILL.

Case first seen June 24th, 1908. A boy nine years old, who presents all the symptoms of a violent case of typhoid fever. The cerebral symptoms were bad from the beginning and for two weeks he could neither hear or talk, and part of that time could not make signs very well. During the second and third weeks after I saw him, he had trouble with his heart. It would skip beats, sometimes as many as every fourth beat, especially while he slept. The lesions were, a posterior lumbar, and lower dorsal, fifth upper dorsal and atlas to the right. At the end of the fourth week the patient was improving quite rapidly when he began to be troubled with some pain in the abdomen, which I thought was due to griping. This pain was not noticed after three or four days, but I noticed a hard mass forming in the lower part of the abdomen, about the region of the bladder. A catheter was passed which showed the bladder to be empty. A digital, rectal examination was then made, which revealed a cyst formation in front of the rectum. None of the symptoms of pus being present I concluded it must be a serous exudate. In about two days the cyst had enlarged till no fecal matter would pass and a rectal tube could not be passed. I then went to one local M. D.'s for surgical aid. When I had described the case to him he thought it might be a rupture of all the coats of the gut, except the serous and the mass was fecal matter in the sack, thus formed; however, he refused to see the case in consultation, and the parent refused to let him see the case, except in consultation. As he had been almost three days without a bowel movement, we decided to take him to Kirksville, a journey of about twenty-four hours. At the end of the first twelve hours of

the journey, the boy began to complain of pain in the region of the tumor. This was relieved by some local work. At the end of the fifteenth hour, some symptoms of collapse were noted and on making an examination I found the cyst to be ruptured and the abdominal cavity filled with fluid. On arriving at Kirksville the case was examined by Dr. G. A. Still, who pronounced the case to be one of pseudo-cyst formation, and said the case ought to get well with good attention and osteopathic treatment. The case improved from this time, except for one or two slight exacerbations. He left the hospital at the end of the second week and was able to be up all day at the end of the fourth week from the time he entered the hospital. The lesions are all corrected and the boy is enjoying perfect health, at present, which he had not had prior to the typhoid.

EDW. ADAMS, D. O.

A message reached me at the hospital one afternoon that a typhoid case was coming in at 4:00 p. m. from Kansas, that would possibly require surgery, as it had an acute pelvic and abdominal cyst-like enlargement, with complete intestinal obstruction. On arrival, Dr. Adams told me of the remarkable history and equally remarkable disappearance, as above given, and accordingly, in company with him the case was examined again and the following symptoms determined. Free fluid in the abdomen but no signs of "waling off" or adhesions: Intestines fairly well distended with gas and fæces: No signs of peritonitis and only the ordinary severity of the typhoid symptoms added to some fatigue, due to the trip.

There was no chance left that the diagnosis of the "Doctor who wouldn't consult" was right. Neither had there ever been any such chance. Imagine the mental capacity of a man who would think that the gut could rupture like a "dissecting aneurism" somewhat, and the fæces getting between the peritoneum, "serous coat" and the outside muscle coat, would form a "cyst" made of fluid, presumably the fæces liquefied, as they do in a septic sewer tank, only they formed no gas and also according to his theory, such a condition, if it were possible, could continue to enlarge without either sloughing and relief of obstruction or septic symptoms.—Rot!

What then really could have happened to produce a real fluid collection or "cyst-like" enlargement, plus intestinal obstruction, with practically uneventful relief upon rupture of the mass. Only one explanation is possible, and that is that the slight adhesions which are common in typhoid were magnified in this case, and possibly, more or less by chance, were so placed as to form a walled off cavity, whose walls were the intestines. The natural serous exudate, not containing pus, could easily enlarge enough to temporarily obstruct the intestine without signs of sepsis and at the same time, being in such a limited cavity, absorption even under pressure, could not keep up with secretion, whereas, when it was thrown on to the general peritoneal surface, although there was about half a gallon by this time, it absorbed by the morning of the next day, without signs of sepsis.

The usual colon tube, etc., relieved the bowels and Dr. Adams continued the osteopathic treatment of the case, in the hospital, with the results mentioned. The rupture of the cyst was probably spontaneous, the increased pressure just tearing the adhesions, which were of course, not as strong as in sepsis, and being serum, its absorption produced no mal-effects, after rupture.

My opinion is that most such cases would necessarily rupture spontaneously, before they could produce very grave symptoms, but that the chances are bad enough that the patient should be put in reach of a good surgeon, who would consult, in order to eliminate unnecessary chance.

GEORGE A. STILL.

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Changes of Address.—Those writing, requesting changes of address, will please send both old and new locations, so that the change may be made promptly.

KIRKSVILLE, MO., FEBRUARY, 1909.

EDITORIALS.

A Little Tip—Save up a two dollar bill for a certain purpose that we will mention in the next issue. " 'Nuff said."

January Class at the A. S. O.—January class though hardly as large as September class, is constantly growing, and is full of enthusiasm. It is known as the first term class, the other classes being known as second, fourth, and sixth, respectively.

Answers to Questions in Osteopathic Diagnosis—The answers to the questions in Dr. Fiske's examination, promised for the February Journal are omitted on account of the large amount of material this month, but will be printed in the March number.

The Composite Board—In this issue of the Journal are printed an article by Dr. F. E. Moore and editorials by Drs. A. G. Hildreth and T. L. Ray, which are worth the careful perusal of all osteopaths. Do not imagine for an instant that because you are in apparent security at present that such will continue to be the case. Read each one of these articles through. **Read every word, and think.** Osteopathy would not have the standing it has to-day had it not been for Dr. Still's policy of keeping away from the medical organizations and resisting their attempts to swallow him.

Science Circles—The pioneer work done by Dr. S. W. Heath, than whom there is no more constant worker and investigator in the profession is bearing good fruit. These circles are organized in groups, and constitute the best method of keeping up with the procession that we have as yet seen. The Journal of Osteopathy desires to promote these groups, and to that end will assist in organizing them, furnishing the supplies for the groups gratis. Any of you who wish to start a post-graduate course in your neighborhood by starting a science group will receive complete information how to organize, how to conduct the circles, and the value to be derived from them if you will communicate with the Editor of the Journal of Osteopathy, or with Dr. S. W. Heath, Syndicate Block, Sioux Falls, S. D.

Interpretation of New York Law—Under date of January 19th, Dr. Ralph H. Williams, osteopathic member of the New York board writes the following letter to Dr. Warren Hamilton: My Dear Doctor:—On account of a misinterpretation of the law in this state, as it appears in the Educational Department Handbook, No. 9, of which you have a copy, it is generally understood that the four year clause in the law goes into effect January 1st, 1910, as the note on the law, page 33 of the Handbook, makes a statement to that effect.

This interpretation is not in accordance with the intention of the framers of the law and having taken the matter up with the Department, I have just received word that they have upheld our interpretation of the law and that the next edition of the handbook which is now in type will state that after Jan. 1, 1911, the four year's attendance at college will be required of all applicants.

A. O. A. Membership—There are many things to be criticized in the conduct of the National Osteopathic Association, but no new organization can be run from its inception satisfactorily and without hitches. We think that those who have been in charge of the A. O. A. have been conscientious in their desires to further the best interest of the practitioners although we think that their methods have been, in a number of cases, fit subjects for debate. The chief stumbling block in the pathway of the profession is lethargy and jealousy of its members. Every one should belong I believe to his district association. If there are two osteopaths in a town, let them organize instead of knocking. Let them meet for the common good, rather than try to see how cheap one can make another feel. Then, join your state association. Make it full of life. Then join even the much criticized (and reputedly) boss ridden national association and laying aside your prejudices against it, attend its meetings, even though you are afraid that you run the risk of being "sat upon". Make it truly representative of all, by all belonging and attending. The osteopaths thoroughly organized need not fear medical aggression. Disorganized, differing, knocking, jealous, each conceitedly wrapped up in his own interest, selfishly ignoring all others, giving cause for criticism as made by Mr. Archer—and there is only one result to be foreseen.

On Reporting Your Cases—The most seductive temptation which the osteopathic physician faces is that of neglecting his case reports. Dr. Ashmore has attempted to secure for us from the members of the A. O. A. and has had a degree of success, but so far there has been no comprehensive system. Dr. S. W. Heath has organized science circles which tended to stimulate their members along similar lines. At the request of some of the leaders of the profession the Journal of Osteopathy will now inaugurate a plan of securing information for the profession at large. It will undertake a Post Graduate course on various osteopathic subjects along the science circle line. A program will be announced for several months in advance and the subjects to be studied, and in the department each month there will be, first the Anatomical consideration, then the Etiological factors, and then the case reports in point, followed by a discussion of the therapeutic measure. The articles will be printed by the Journal staff of contributors, but it is up to the profession at large to furnish the case reports, failures to be reported as well as successes. To each one who may desire to contribute these, and who indicate a desire by a postal card, we will send blanks and stamped envelope to bring the reports back to us. These case reports and the comments will later be bound and a copy given to any subscriber of the Journal who will furnish reports for the entire series. To any other subscriber of the Journal they will be furnished at the exact cost of printing and transportation. This will form the

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most valuable Post Graduate extension course ever projected. It will mean a considerable outlay of money for the Journal Pub. Co., with no possible hope of recompense, and is undertaken merely to aid the profession at large. Journal subscribers, and others, will you join with us. If you will, send in your card now.

* * *

INDEPENDENT VERSUS COMPOSITE BOARDS.

There is doubtless nothing, that should have so much of our thought and deliberation, at this time, as the kind of boards and laws, that we should select for our own government and for the regulation of our science.

Some may think at the outset, that these laws only govern us, without regulating or affecting our science, but after careful consideration, they will see, that our schools will have to teach according to the requirements of the state laws, or they will have no place to send their graduates. It is very difficult to make a law retroactive, that is to get rid of those who are in a state when it is passed, but it is easy to make one that will keep new osteopaths out.

The wisest stroke, that the American Medical Association has ever made, for the subjugation and destruction of other systems of therapy, is their decision to allow the least representation possible on a composite board. Some of our friends have like the fly, walked into the spider's parlor. We will just as surely have cause to regret accepting this kindly (?) offer, as did the fly.

Let us see about this. In Texas, the medical men, who have been our bitterest enemies and the most unprincipled in their attacks are the ones, that, when they thought our independent bill would pass, became our friends (?) and offered representation on composite board.

The hunter whistles to the rabbit, the snake stares at the bird and the American Medical Association offers representation on composite board, all for the same purpose, that they may charm, capture, devour and assimilate. If they should succeed in getting osteopathy down, may the good Lord be with us, that we may be enabled to act like Jonah, before the assimilation process is started.

I have been taking census of our profession in the different states and find, that the increase is greater in states that have independent boards. If practice is too heavy and we wish to reduce it, we can do so very effectively, if we will get laws passed, that will prevent other osteopaths from coming into our state. After over ten years practice, I have found that addition to the forces in our city has increased rather than diminished my practice.

Medical men and osteopaths on a composite board mix just like oil and water, and on account of greater numbers, the M. D's. are oil on top and the D. O's. are water at the bottom. Oil can run on top of water as smoothly as if there were no water under it. Just so, the medical men can continue their policies with one or two osteopaths on the board, as well as with none.

It is easy to see that we, unless we have veritable giants on composite boards, can, on account of small representation, have absolutely nothing to say as to what the policies of the board shall be.

The independent board is considerably harder to get, because our enemies see that it will preserve the identity, protect the growth and insure the liberty of our science.

The composite is easier to get, because, our enemies know, that they will eventually be able to control our schools in the way of subjects taught, by reason of their greater numbers on boards. They will not throw out offers of representation on

board until they feel that we will succeed in passing an independent bill. When such an offer is made, we can depend upon it, that they are scared, and by doubling our efforts as did the men of Louisiana, we will be the victors.

Shall we fight for what we want or for what our enemies wish to give us? A small force that fights for its just rights, can defeat a great army that seeks to oppress. A dog that fights in his own yard can vanquish another, that could whip him any time on a common ground.

Come, lets to the fight for what we want. It is a just cause on our own territory and success is ours, if we will but persevere.

THOMAS L. RAY.

* * *

GET IN LINE.

In the December issue of the A. O. A. Journal there appeared an article entitled "Read, Think and Act," from the pen of Dr. F. E. Moore, of LaGrande, Oregon and which is reprinted on page 80 of this issue of the Journal of Osteopathy.

Dr. Moore, from his close relation to the A. O. A., and the responsible positions he has so ably filled in that body, and as the osteopathic member of the present State Medical Board of Oregon, speaks from the standpoint of acquaintance with conditions as they are. And he simply knows what he is talking about.

In the above mentioned article he quotes largely from the records of "The Council on Medical Education," of the American Medical Association as given in their Association Bulletin of May 15, 1908. Every osteopath on earth should read that article and then file it away and re-read it at least once a month until they get it so indelibly stamped into their hearts and lives that it can never be effaced. And it seems to me that no living osteopath on earth could, after knowing the position of the old schools toward osteopathy as quoted therein by representatives of their profession in their standard organization that represents all of this country from Ocean to Ocean and from the great lakes to the Gulf, any longer question the necessity for our own independent boards—you who have advocated the composite boards read that article and then tell me of one single good reason why we should go to them or be associated with men who take the unjust, biased, prejudiced position they do toward us when we seek fair laws and justice for ourselves, and for those who wish to patronize the osteopaths in general.

Surely we should "Read, Think and Act." The crying need of the hour is professional backbone of the Andrew Taylor Still stripe, with our faces to the front, our bodies erect stimulated by a just pride in our rich and growing successes. There can be no need for alarm if our people but do their duty. Never has there been a time when our opportunities were greater, nor when the future guaranteed more than now. But we can only reach and realize the fullness and richness of our possession by bearing our full share of responsibilities, and by being alive and awake to all the demands of our profession upon us. After reading Dr. Moore's article no man or woman can conscientiously question that one if not the most important of all the questions that now confronts us is legislation. When an organization like the American Medical Association with all its power and force spends nearly all of one of the sessions of its Educational Council in discussing osteopathy and the best methods of controlling us, it is surely time for our own people to awake to a sense of our duty to ourselves. They have a legislative council and it is far-reaching, both in organization and influence. Should any of our people after reading Dr. Moore's article still doubt what should be our course as regards legislation and an independent board, I beg of them

to get the January number of the Journal of Osteopathy published at Kirksville, and read there on page 37 a paper read by M. Clayton Thrush, Ph. M., M. D., of Philadelphia, entitled "Osteopathic Versus Drug Treatment." This paper was read at the 59th session of the American Medical Association held at Chicago in June, 1908, read it,—bristling full of antagonism, criticism and ridicule for the osteopaths and osteopathy and then tell me in heaven's name what sane excuse any one can offer for us to accept membership on any one of their boards; read it carefully, digest it, read all they have to say of control of us, and what kind of legislation they advise. Read what he has to say of osteopathic State Boards, read it and then tell me should we in any instance accept composite boards with them. Nothing has ever been proposed by our profession that means more to us than the execution of the plan laid out by Dr. Heine for a national legislative body for our profession.

Each State Association should at its next regular meeting elect a standing legislative committee. Dr. Heine's plan in full is for each state to create the elective officers of a standing legislative committee to be composed of five members, each member to be elected for five years. (The first committee would of course, have to be elected one for one year, one for two years, and so on, until five were elected.) Then each year this committee of five are to elect one of their number to attend the A. O. A. meeting and meet with the national legislative committee, thus creating the National Osteopathic Legislative Body. These committees should by all means be elected this year. No state should fail to do this NOW. If your constitution does not permit it, amend the constitution. Put in your notice for the amendment NOW; get busy and do this work. No matter whether you have a good law or a poor one, or no law at all. Elect this committee and make it their duty at all times to keep in touch with all medical legislation. We can do a world of good along this line, and it is our duty to do this work. No State Association in this Union should fail to have its legislative member at the A. O. A. convention in Minneapolis next August.

A. G. HILDRETH.

* * *

CLINIC RESEARCH MUST NOT BE DROPPED.

Dr. Bailey Suggests a Card System of Recording at the Fountain Head of Osteopathy—From the trend of osteopathic literature issued since the Denver convention when the able two hours stereopticon lecture was given to the world at that time by our most able and esteemed friend, Dr. Carl P. McConnell, one would infer that all our great lights in the matter of research are delving in the direction of pathological proofs of the principles underlying our science and of its worth.

To the scientist and the college professor and for the perpetuation of records for future generations, to enlarge upon those principles, or discard many faulty premises we now hold, is a very necessary and laudable undertaking for so young a science.

But, we must not get frenzied, or "one idea" minded in this research work of the pathological kind, for it can only be successfully carried along by a few.

Clinical research and clinical proof is just as necessary for the laity while properly authenticated records, properly kept and tabulated are still as needful for every practitioner of osteopathy to-day, as they were when in the olden days we were trying to locate centers for this or that organ and to be positive about them.

If we conform to the nomenclature of the medical profession in general, the medical authors will understand what we say and also we will be readily understood by the the public at large; then we will soon be able by classification to say we give

and know we are giving, such and such kind of treatment. In our consultations with M. D's., for we will have more of it to do now, should they use such phrases, "as sedative treatment, stimulative, alterative, tonic, emetic, or just administer a respiratory stimulant", they and you will understand each other.

Let the patient and the medical profession at large know that some of our work is preparatory, some palliative, but teach them they must never say they have had osteopathic treatment until the corrective treatment has been successfully administered and nature's forces have had time to correct and alter pathological changes that previously had existed. Such will distinguish us from the masseur, more than you can imagine.

Slowly our profession has drifted away from the "meal-ticket-like" card system for so much per month, which often found and really bound us in doing a \$50.00 or a \$500.00 job for \$2.00 or \$3.00 which was unfair, considering our skill, for we saved the people so much money. If we can progress here, we can advance along the lines mentioned in this article more easily.

Now again, I find myself drifting upon my hobby of charging for what we are worth and what we do. Of course if our work is worth only a dollar to the patient, for goodness sake don't charge him more, but be sure we know our worth. If our skill is in demand to such an extent that 50 people want us when we can see only 25, let the lucky 25 pay for calling a good doctor and thank their stars that they are so fortunate.

But back to my subject. Do you know what to do if some medical doctor would say, 'this case, I think needs a cholagogue treatment?'

Would you proceed along the same course in medicament as for a catarrh of the stomach or expect the same lesions that you would for deficient hydrochloric acid? You know the difference between a fermentative acid, such as is found in a pyrosis and a hyperacidity of free HCl and would the osteopathic technique be the same? Furthermore, would the cost to the patient and the safety for his health be the same, provided you are ignorant on these essentials? These are questions to be solved not by the ordinary case reports such as have been published.

The elimination of doubtful questions like these, are some of the distinguishing features of a good skillful doctor and determine whether as a marksman you are to use a shot gun or a rifle. To be a good rifle shot after disease, you necessarily must be a good diagnostician and be abundantly supplied with more than ordinary horse sense. Train into an intuitive mind. See through your case as you ask questions of history, symptoms, etc., and be able to read between the lines if anything has been left out, or if the patient is trying to deceive you.

Properly tabulating and recording by a system of kinds of treatment given, will make us able to use proper methods, enable us to consult with medical brethren intelligently, and bring us closer to our patient understandingly, by a classification used for centuries.

Suppose the patient needs a diuretic what would you do? Would it be the same treatment as one to restore the nutrition in Bright's disease?

If the patient had continuously dilated pupils would you suspect something wrong with the eyes, or the neck or a reflex condition from the sexual organs, and how would you classify the treatment? These are questions of Clinical Research, and tabulation to make the weakest osteopath (barring personality, which is always a great factor in any doctor, especially an osteopathic physician) equal in knowledge to the best. Possessing a fund of this kind of knowledge will lessen the mistakes some of us are continually making.

If, as we say, the human body is a chemical laboratory, where are the acids, the salts, the alkalies, the solvents, etc., and how can we draw upon them with the certainty of a skilled marksman drawing bead upon his prey.

From the foregoing do I need further to say that clinical and physiological research should not be abandoned?

Pathological research will prove or disprove what we already are supposed to know and believe, but let us put up some further claims for advancement, that you and I can work out in our daily routine if we but observe and tabulate.

Remember discrimination of treatment and differential diagnosis is needful. If we do not know how to discriminate scientifically, it is time we were formulating a how.

Systematizing and classifying is now upon us. Shall we rise to the occasion or drift?

Frisco Bldg., St. Louis, Mo.

HOMER E. BAILEY, D. O.

VOLUME SIX, NUMBER TWO, (FEBRUARY.)

THE LAST O. J. THAT WILL BE PRINTED WITHOUT THE MONTH AND YEAR.

With the March number of the Osteopathic Journal, there will be a new design, a new cover, a new arrangement, all of the material will be in large type, and other improvements will be in evidence. If you want a sample copy send a postal card for it now.

Meanwhile, better send in an order for the February Journal which contains the following good things:

ONE OLD SCHOOL DOCTOR'S IDEAS.

Some confessions of an M. D., who turned D. O., and was mighty glad.

PSEUDO-SCIENCE VERSUS SCIENCE.

A page of good sound sense.

THE HEALING POTENCIES OF OSTEOPATHY.

Five pages of explanation, answers to questions, illustrations, and sledge hammer blows against drug fallacies.

A PROMINENT EDUCATOR CONCERNING OSTEOPATHY.

Why he studied and has achieved success.

THE BLOOD IS THE LIFE.

The physiology of the blood, and its relation to osteopathy, plainly treated.

HUMANITY'S PROGRESS AIDED BY PHYSICIAN.

A short history of the advance in Therapeutics with a quotation from Dryden, who was an osteopath at heart, and showing how in this article the public may assist in the crusade against disease.

HOW MANY DO YOU WANT, DOCTOR?

JOURNAL OF OSTEOPATHY PUBLISHING Co.,
Kirksville, Mo.

A New Case Record—There have been many devices for the preservation of case reports, some of the card style, some of the loose leaf style but probably the best to date is one recently published by Mr. Bert R. White of the senior class A. S. O. This is gotten up with the view of recording pulse, respiration and temperature as well as the treatment itself gives a complete blank for physical, laboratory and osteopathic examination with the reverse of the sheet devoted to family history, personal history, treatment and remarks. There are two hundred loose leaves indexed with twenty sheets, the leaves being nine and a half by twelve inches. The book is bound in stiff boards covered with cloth and is of the loose leaf variety. The price is \$3.50 delivered.

Published by Bert R. White, A. S. O. student, Kirksville, Mo., who will send sample sheets on request.

* * *

STATE BOARDS AND LEGISLATIVE.

Oklahoma—Report of the Examination—Report shows candidates from some thirty Medical schools, there were forty-four candidates of which thirty-four passed and ten failed. Of the ten that failed, six made a passing average, but fell below the 50% minimum on one or more branches.

Oklahoma—Reciprocity May be Granted—The reciprocal rule voted down at the October meeting was taken up at the last meeting and passed by vote of six to three.

Washington—Conflicting Reports Received—From medical sources comes the cheering news that only the fake osteopaths are arrested and that the genuine osteopaths are welcome to the state, and will not be molested. From other medical sources, comes a contrary statement that osteopaths are outlaws, and it is only a question of time until they will be removed from the state. From osteopathic sources it is stated by some that the regulars are joining hands with the fakirs, by others, that there is a ring to try to keep out all whom they do not like. Several of the osteopaths have on their card as a slogan "thirty-nine states say that we are Doctors: Washington says no." In the meantime there are four bills being introduced in the legislature.

Canada—Outlook Encouraging—In one province there is a chance of getting a bill through.

Colorado—Legislative Funds Secured—The Colorado osteopaths are not so much in the pocket as Dr. S. D. VanMeter would have us think, but are up and going and stand very good chance of getting legislative enactment.

Illinois—Harmony at Last—Dr. Egan in his idea that the osteopaths are settled in Illinois is apparently complacently sleeping, but he may be rudely awakened by the passage of an independent board law in the great state of the middle west. Dr. J. H. Sullivan writes, January 21st, "The legislative situation in Illinois looks promising, I succeeded in interesting Mr. Wm. J. Calhoun of national fame in our cause. He will guide us in our coming fight."

Illinois—Chiropractor Settles Case—Chas. Swartz of Monmouth, who describes himself as a gentleman with such pleasing manners and who was found guilty of breaking the Illinois Medical law and was fined \$100.00, but who appealed the case, finally settled it out of court and left the state. One wonders why that with the Illinois law allowing anybody to take the examination he did not make the attempt but after reading Dr. Hunter's article in this issue, the reason is evident. Especially so when one realizes that he was a product of one of the mushroom offshoots. In his

farewell, he says, "I shall leave this city in the near future, since I intend to further my scientific (?) knowledge, and take up this work in a distant city."

Michigan—New Appointments on the Board—Dr. Edith Ashmore under date of January 19th, sends the following information:

As secretary of the Board, it becomes my duty to announce to you for publication in the Journal of Osteopathy the changes recently made by appointment by our Governor, Fred M. Warner, on our state board. Dr. Glenn Hicks of Jackson will succeed F. H. Williams, and B. A. Bullock will follow S. R. Landes in April. The other members of the Board are George M. Smith, Mt. Clements, president; W. H. Jones of Adrian, and Edythe Ashmore of Detroit, elected secretary.

Pennsylvania—Bill Before the Legislature—In Pennsylvania the osteopaths do not anticipate much opposition from the M. D's. but expect most of the trouble to come from the fakirs who have been driven to that state by the passage of the N. Y. law.

New Jersey—Dr. Smith in Preliminary Campaign—After a short tour of some of the cities by Dr. Smith during the holidays, the New Jersey osteopaths launched their campaign, with a fair outlook of success.

Hawaii—Possible Change of Law—At present in the Islands one holding a California certificate is recognized as a practitioner. But according to newspaper reports there may be some change made this year.

Wisconsin—Dr. Jorris Resigns—Dr. A. U. Jorris, the first osteopath ever to hold office on a medical board has resigned his membership after service of eight years, although his present term does not expire until next July. The State society has chosen five names from which Gov. Davidson will make an appointment, until which time Dr. Jorris will continue to serve. Dr. Jorris is a thorough osteopath and has been a man of such calibre that his opinion was recognized by his colleagues on the board as worthy of adoption. During his membership on the board no osteopath has had just cause for complaint, and it is with regret that the profession sees him go back to a private practice. There is this advantage though in the Wisconsin law that the State Association chooses to a certain extent the osteopathic members, so he will have a worthy successor.

Massachusetts—A Communication From the Other Side of the Fence—In the Massachusetts correspondence is seen a review of the situation as seen by the Journal's New England representative, the following letter was sent personally by a friend of the Editor:

I'm going to give you a few facts regarding the Massachusetts situation. The appointment of an osteopath on the state board was sprung by Dr. Harvey, the secretary of said board for this reason.

They plan to legislate this session so as to make osteopathy the practice of medicine. The appointment already does that.

They plan not to allow the straight A. T. Still, D. O. the privilege of calling him or herself "Doctor."

They plan to not allow the signing of death and birth certificates by an osteopath.

They plan that a man must be a graduate of a straight medical school before he can take the state board examination.

In other words they plan to put osteopathy on a level with eddyism and massage, Those D. O's. who have passed the state board are working hand in hand with the M. D's. forgetting the fact that their practice all comes from their being osteopaths and not M. D's.

WE WILL ACCEPT A CHECK FOR TWO DOLLARS.

STATE BOARD EXAMINATION INFORMATION.

STATE AND KIND.	WHEN.	WHERE.	TIME TO FILE.	PRESIDENT OR SECRETARY.
Alabama (4)	July 13.	Montgomery.	July 12.	W. H. Sanders, Montgomery.
Arizona (4)	April 5-6.	Phoenix.	Mar. 15.	Ancil Martin, Phoenix.
Connecticut (1)	March 2.		Feb. 16.	W. A. Wilcox, Waterbury.
Delaware (3)				A. E. Frantz, Wilmington.
Illinois (4)	April 15.	Chicago.	April 1.	J. A. Egan, Springfield.
Indiana (2)	July 13-14-15.	Indianapolis.	July 8.	W. T. Gott, Indianapolis.
Idaho (1)	June 1-5.		May 18.	E. G. Houseman, Nampa.
Louisiana (1)				
Massachusetts (2)	Me. 9, July 13, Nov. 9		5 days prior.	Edwin B. Harvey, Boston.
Michigan (1)				
Minnesota (1)	March 9-10.	St. Paul.	March 8.	Geo. L. Huntington, St. Paul
Nebraska (3)	Feb. 3-4.	Lincoln.	Feb. 1.	E. J. C. Sward, Oakland.
New York (2)	Feb. 2-5. Jan. 18-21. June 22-25. Sept. 21-24.	New York, Albany, Syracuse, Buffalo, candidates notified.	One week prior to examination.	M. J. Lewi, New York.
New Mexico (1)	April 5.	Santa Fe.	April 5.	Chas. A. Wheelon, Santa Fe.
North Car. (1)	Probably July.	Raleigh.	Any time.	A. R. Tucker, Durham.
Ohio (3)	2d week in June.	Columbus.	10 days prior.	Geo. H. Matson, Columbus.
Oklahoma (2)	April 13-14-15.	Guthrie.	Any time.	Frank P. Davis, Enid.
Oregon (2)	July 6.	Portland.	10 days prior.	Byron E. Miller, Portland.
Virginia (4)	June 22-23.	Richmond.	Day preceding.	R. S. Martin, Stewart.
Tennessee (1)	Feb. 12-13.	Nashville.	Feb. 8.	J. Erle Collier, Nashville.
Texas (2)	June 22-3-4.	Cleburne.	June 10.	M. E. Daniel, Honey Grove.
Wisconsin (2)	July 13-15.	Madison.	Before 13th.	J. V. Stevens, Jefferson.
Wyoming (4)	Feb. 10, 11, 12.	Cheyenne.	Feb. 1.	S. B. Miller, Laramie.

(1)—Independent. (2)—Composite. (3)—M. D., with osteopathic assistants. (4)—Straight M. D.

Then the osteopathic member on the board is in favor of a compulsory examination for unregistered osteopaths now in practice.

In fact the straight D. O. is in danger of being legislated out of the state unless we can keep the exception clause in the medical law.

It will be remembered that the present law is construed one way by some osteopaths as putting an exception to their examination; while by the secretary himself, osteopathy is counted as a system of medicine. The next two weeks will probably tell which interpretation will win.

The St. Louis osteopaths who are taking post-graduate work, under Dr. George Still, are: Drs. Annie M. Adam, Homer E. Bailey, Elmore Chappell, Hershel Conner, W. D. Dobson, W. N. Dobson, Alfred Edwards, W. F. Englehart, J. O. Hatten, A. G. Hildreth, A. B. King, Louise Lewis, O. S. Miller, A. D. Nichols, Florence Notestine, J. R. Shackelford.

In addition to these there are eight or ten irregular attendants.

* * *

ASSOCIATIONS.

Colorado—Dr. G. M. Laughlin Performs Congenital Hip Operation at Denver—Meeting of the Colorado Osteopathic Association held at the Albany Hotel, Denver, opened Monday evening, December 28th, with short reception followed by address of president and discussion on legislation.

DECEMBER 29—MORNING SESSION.

Address of Welcome, Hon. H. A. Lindsay, representing Mayor Robert W. Speer. Response, Dr. J. D. Glover of Colorado Springs.

Paper—"The Internal Secretions in Osteopathic Treatment," Dr. E. C. Fortin, Colorado Springs.

Discussion by Drs. G. W. Perrin, J. D. Glover, W. P. Snare, G. M. Laughlin and L. M. Burrus.

AFTERNOON SESSION.

Clinics—Dr. Geo. M. Laughlin, of Kirksville, Mo.

BANQUET—7:30 P. M.

Dr. L. B. Overfelt..... Toastmaster

SPEAKERS.

- J. T. Bass..... "The Past"
- J. D. Glover..... "Local Organization"
- C. E. Taylor..... "Our Present"
- E. C. Fortin..... "The Osteopathic Idea"
- Hon. J. A. Rush..... "Legal Status"
- G. M. Laughlin..... "Osteopathy"
- M. A. Morrison..... "Our Future"

DECEMBER 30—MORNING SESSION.

President's Address..... Dr. Overfelt
Report of nominating committee recommending the re-election of old officers.
Motion to that effect seconded and carried.

Paper—"Osteopathy and Suggestions," by U. S. G. Bowersox, of Longmont.
Talk by Dr. G. M. Laughlin on his experience with the modified Lorenz operation.

AFTERNOON SESSION.

Meeting called to order by President. Plans made for raising money for legislative expense.

Dr. G. M. Laughlin assisted by Drs. C. C. Reid, E. C. Fortin and G. W. Perrin, performed the Lorenz operation on a child two years of age.

Paper—"Pediatrics", C. E. Taylor, of Grand Junction.

J. T. Bass was elected delegate to Legislature.

C. C. Reid was elected delegate to Council.

Adjourned to meet for semi-annual meeting at Boulder.—George W. Perrin, Secy.

Colorado—Denver City Association Meets with Dr. Bass—The Denver Osteo-

See March Journal for prices on reprints of Dr. Hunter's article.

pathic Association held its regular monthly meeting at the office of Drs. J. T. and E. C. Bass, 624 Empire Bldg., on the evening of Jan. 2nd, 1909, after reading of the minutes of previous meeting, a short discussion was held as to the manner of conducting a city clinic and what character of clinics should be carried on.

A committee was appointed to look into the matter, and the secretary was instructed to write to other cities now conducting clinics.

Dr. Frey asked to be released of the office of second vice-president as she expected to go abroad in a short time.

Dr. R. R. Daniels then read a paper on "Adenoids," the paper showed careful preparation and was a credit to any city association being of special interest to osteopaths, as the paper took up the various lesions we find in such conditions and the many neuroses that may be connected. Among the lesions mentioned were second, and third cervical, and also upper three dorsals, specially second and third; among the neuroses were, enuresis, general nervousness, restlessness, anemia, and deformity of chests, that so often follow such conditions.

Discussion of paper was followed, Dr. C. C. Reid leading the discussion.

A very profitable and instructive evening was spent, and all spoke of the great advantage of having such a subject.—Yours fraternally, J. ALVIN STEWART, Sec'y.

Illinois—Program of Third District Meeting—Osteopaths in the Galesburg district will meet at the residence of Dr. Ada Chapman, Feb. 3rd, for the election of officers and to listen to the following program:

The Needs of the Profession, H. P. Ellis, Canton; Enuresis, Etta O. Chambers, Geneseo; Diabetes Mellitus, B. J. Albright, Kewanee; Influenza, Fred B. DeGroot, Rock Island; Our Ethical Standing and How to Improve it, Lola L. Hays, Moline.

Illinois—Fifth District Osteopaths Have Interesting Lecture on Technique—The Fifth District Osteopathic Association of Illinois met at Decatur, Dec. 19, for their quarterly meeting. We had with us Dr. F. P. Pratt, of Kirksville, who conducted clinics during the afternoon and part of the evening, after which he gave us a lecture on "The Spinal Lesion and its Treatment." The lecture was one of the best that we have had. It was practical and of great value to the practitioner in the field. Dr. Pratt is not only able to demonstrate the technique of treatment, but is also a fine diagnostician—giving us some very valuable points in physical diagnosis. The meeting was held at the Decatur Hotel, where an excellent banquet was served from 7:30 to 9 p. m. Our next meeting will be held at the Beardsley Hotel, Champaign, Ill., the last Saturday in March.—F. A. PARKER, Sec'y.

Maine—Three New Members Received at the Quarterly Meeting—The quarterly meeting of the M. O. A. convened at the office of Dr. S. T. Rosebrook on Saturday, Dec. 26th.

At 2:30 p. m. the meeting was called to order by the president with a full attendance of the members.

After the transaction of routine business, Dr. Lillian P. Wentworth of Augusta gave an interesting talk on "Physical Culture," which was followed by questions by members and exercises by the Doctor which she considered helpful.

Dr. Geo. H. Tuttle of Portland read a fine paper on Scoliosis which was followed by a general discussion.

The banquet was held at the Falmouth Hotel.

At 8:30 the association had the pleasure of listening to a scholarly paper on Medical versus Osteopathic treatment of Constipation by Dr. F. E. Clark of Portland. This was followed by a lengthy and very interesting discussion of the subject.

TWO ONE DOLLAR BILLS WILL DO.

Still National Osteopathic Museum, Kirksville, MO

Dr. Nora Brown of Waterville and Drs. Kellet and Sanbourn of Skowhegan were the new members for December.—VIOLA D. HOWE, D. O., Sec'y.

Missouri-Kansas—Border Osteopaths Consider Clinics—For enthusiasm and regular attendance the border osteopaths have the record of the country, and if other associations with a large membership would show the same enthusiasm and the same absence of jealousy the whole profession would be in better shape. The following is the report of the monthly meeting, submitted by the secretary, Dr. Geeslin.

The S. W. Mo. and S. E. Kans. O. A. met Saturday evening, Jan. 2, with Dr. M. S. Slaughter at Webb City, Dr. Wolf in the chair. Eleven members and five visitors were present. Business was attended to and then the major part of the session was spent in consideration of a clinic brought by F. M. Geeslin. A boy of seven, with enlargement in the anterior triangle of neck and supraclavicular area, brought forth animated discussion as to character of tumors, whether tubercular or non-tubercular whether the case was operative or non-operative, etc. Florence Geeslin read a paper "Conflicts With Nature." Social chat closed the meeting.—FLORENCE MAGERS-GEESLIN, Sec'y.

Gulf States—Florida—Joint Meeting of the Two Associations—The annual meeting of the Gulf States Osteopathic Society was held at Jacksonville, Jan. 1, the attendance being about fifty members out of a total enrollment of 100, and the proceedings proved interesting and important. Percy H. Woodall of Montgomery, Ala., presided, having been elected president at the first annual meeting last February, and F. F. Jones, the secretary, attended to the minutes.

Beginning at 10 o'clock a. m. the association was in session continuously until 5 p. m., hearing papers, discussing matters of importance regarding the profession and witnessing clinics.

Interesting papers were read as follows:

Neuritis, by E. M. Sasvil of Montgomery, Ala.; Advantage of Organization, by Grace Bullas of Biloxi, Miss.; Congenital Torticollis, by R. T. Clark of Natchez, Miss. There were other papers and various matters occupied the attention of the delegates.

The election of officers resulted as follows: President, J. S. Blair of St. Petersburg, Fla.; vice-president, Murray Graves, Monroe, La.; secretary, Frank Jones, Macon, Ga.; treasurer, Grace Bullas, Biloxi, Miss. New member of Board of Trustees, E. M. Sasvil of Alabama.

The next meeting will be held in Georgia, the time and exact place to be arranged by the trustees.

FLORIDA ASSOCIATION.

The meeting of the Gulf States Society followed the annual meeting of the Florida Osteopathic Association, at which various papers were read and clinics held. The Florida association elected officers as follows: President, C. E. Bennett of Pensacola; vice-president, P. R. Davis of Jacksonville; secretary and treasurer, A. E. Berry of Tampa.

Michigan—Southwestern Association Meets at Kalamazoo and Discusses Legal Matters—An effort to improve the law regarding the practice of osteopathy will be one of the matters that will later engage the attention of the members of the Southwestern Michigan Osteopathic Association. B. A. Bullock, Hastings, president of the state board; Elmer Bristow, Pontiac, treasurer; and W. H. Jones, Adrain; and Edythe Ashmore, Detroit; members of the state board, were present and made addresses.

These matters will be taken up with members of the legislature and an effort will be made to have the improvements in the law made effective.

The program for the morning and afternoon sessions was reversed. The questions discussed at the morning session were "Lumbar region and diseases of colon." In the afternoon the subject was "The Pelvis."

The officers of the association are: President, Betsey Hicks, Battle Creek; vice-president, George H. Snow, Kalamazoo; secretary-treasurer, Frances Platt, Kalamazoo.

New York—Greater New York Society Passes Into History—At the last regular meeting of the Greater New York Osteopathic Society, held at the Imperial Hotel, New York City, Dec. 19, 1908, by unanimous vote a committee was appointed, with full power to Organize and Incorporate a new osteopathic society, and the Greater New York Osteopathic Society, as an organization, was honorably dissolved.

The "Osteopathic Society of the City of New York" has been organized and incorporated under the laws of the State of New York, to supplant the Greater New York Osteopathic Society, with the following officers and directors:

Officers—Guy Wendell Burns, president; Cecil R. Rogers, vice-president; Joseph Ferguson, secretary; Norman D. Mattison, treasurer.

Directors—Charles S. Green, William D. Fitzwater, Charles H. Whitcomb. Keeper of Records—Arthur S. Bean.

After dissolution, the Greater New York Osteopathic Society, as an honorary body only, was re-organized by the committee, to remain inactive, and together with the preservation of all books, documents and past records, to hold honorable position upon the records of the new society.

This change of organization was necessary for the best good of the science of osteopathy, and that the society may be a power in the upholding of the tenets of the code of ethics in the metropolitan district.

The policy of the society is to be thoroughly osteopathic in the strict sense of the term. The Osteopathic Society of the City of New York has adopted and will maintain the high standards which the Greater New York Osteopathic Society has always upheld, and further, will be active in the movement to rejuvenate and perpetuate the principles and practice of the science of osteopathy, as taught by Dr. Andrew Taylor Still.—Signed—GUY WENDELL BURNS, President. JOSEPH FERGUSON, Secretary.

New York—Upper Hudson Society Holds Meeting—The January meeting of the Hudson River, North, Osteopathic society was held Jan. 21, in the office of Dr. Mae Hart, Albany. Dr. Alice A. Brown of Troy read a paper on "Diseases of the Stomach."

Northeastern Pennsylvania Osteopaths Discuss Emergency Cases—The Northeastern Pennsylvania Osteopathic association met at the home of Dr. Katherine G. Harvey, Jan. 9th. Dr. Virgil A. Hook, of Wilkes-Barre, gave an interesting talk on "Ovaritis," and Dr. John T. Downing, of this city, led a discussion on "Emergency Cases."

Oregon Association Elects Officers—The seventh annual meeting of the Oregon Osteopathic Association was a big success.

Splendid program with general discussion and the osteopathic spirit bubbling forth at every hand.

Below I give you list of the officers elected for coming year. President, H. T. Leonard, Portland; first vice-president, W. L. Nichols, Ashland; second vice-president, Rhoda C. Hicks, Astoria; secretary, Mabel Akin, Portland; treasurer, R. B. Northrup, Portland.

Board of Trustees: B. P. Shepherd, Portland; W. O. Flack, Portland; Gertrude Gates, Portland; Kathryn Rieter, Portland; Frank G. Carlow, Medford.

Dr. H. F. Leonard gave a report of the prosecution of several "quacks," resulting in the conviction of Dr. Isabelle Mackie, J. E. Jewell, and C. E. Wiggins for practicing osteopathy without licenses.

Preceding the evening session a banquet was held in the Perkins Grille, Dr. G. S. Hoisington, acting as toastmaster, with responses from the following: Drs. Moore, Shepherd, Gates, Nichols, Carlow, Leonard and Akin.

Fraternally, MABEL AKIN, Sec'y.

Ohio—Dr. Hulett Acts as Toastmaster—The eleventh meeting of the Ohio Society was held in Toledo at the Hotel Secor, Jan. 7th. Speakers were Drs. M. F. Hulett, R. W. Sanborn, R. E. Tuttle, C. M. T. Hulett, C. V. Kerr, Ella Liffering, F. W. Long, H. W. Forbes, L. S. Sorensen, E. H. Cosner, J. Martin Littlejohn, F. C. Smith, M. E. Clark, Clara Wernicke, J. H. Long, H. L. Knott, W. E. Reece. Dr. E. R. Booth conducted a discussion on the Field of Osteopathy. Dr. M. E. Clark conducted an interesting Question Box. The officers elected were: President, C. E. Marsteller; vice-president, F. W. Long; secretary, E. H. Cosner; treasurer, William S. Pierce.

Committee Elected—L. C. Soresen and C. A. Arand were elected members of the executive committee. Drs. Clara A. Davis, of Bowling Green, F. E. Corkwell, of Newark, and L. A. Bumstead, of Delaware, were re-elected, the committee consisting of five. The state osteopathic examining committee consists of Drs. M. F. Hulett, of Columbus; E. R. Booth, of Cincinnati, and G. Westfall, of Findlay. Dr. E. W. Sackett, of Springfield, was elected delegate to the American Osteopathic association.

Philadelphia City Association Listens to Dr. Willard—The regular monthly meeting of the Philadelphia Osteopathic Society was held Tuesday evening, Jan. 5, '09, at 1414 Arch St., president Beitel, presiding.

Following the business portion of the meeting the president introduced Dr. Earle S. Willard, of Philadelphia, who had prepared a paper upon, "The Universal Abnormality of the Human Spine."

It was shown by his discourse that Dr. Willard had devoted much time and thought to this phase of osteopathic diagnosis. He illustrated the statements by exhibiting five or six spines of apparently healthy individuals. A general discussion followed. The meeting was well attended.—ABBIE JANE PENNOCK, Sec'y.

Pennsylvania—Northeastern Meeting at Scranton—The Northeastern Pennsylvania Osteopathic Association held its regular monthly meeting at the office of John T. Downing, Scranton, Dec. 12th, at which time the following officers were elected for the ensuing year: President, Margaret Evans, Wilkes-Barre; vice-president, Matthew C. O'Brien, Pittston; secretary and treasurer, A. May Benedict, Scranton.

The program was: "Gastritis," W. J. Perkins; "Paralysis Agitans," E. M. Rosengrant; "Rheumatism," Catherine Davies.

Virginians Meet at Norfolk—The Virginia Osteopathic association held their annual meeting Saturday, Jan. 16th, at Lynnhaven Hotel, Norfolk, Va.

The following officers were elected: President, W. D. Willard; vice-president, Maria B. Walkup; secretary and treasurer, Margaret Bowen.

Executive Committee: Drs. Chas. Carter, S. H. Bright, E. H. Shackelford, Chas. R. Shumate, Margaret Bowen.

Legislative Committee: Drs. Geo. E. Fout, E. H. Shackelford, Chas. R. Shumate.

Dr. Margaret Bowen appointed delegate to the A. O. A., Dr. S. H. Bright, alternate.

A motion was made and carried to the effect that the next meeting shall be held the first Saturday in December. The place of meeting to be selected by executive committee, and committee to notify members of the association as to place of meeting sixty days prior to date of meeting.

Several new members joined the association. A paper by Dr. Chas. Carter, entitled "The Best Physician" was an interesting feature of the meeting, and thoroughly enjoyed by all.—MARGARET BOWEN, D. O., Secretary and Treasurer, 102 E. Grace St., Richmond, Va.

Wisconsin—Badgers Meet With Dr. Matson at Eau Claire—The eleventh annual meeting of the W. S. O. A. was held at Eau Claire, Wis., on Dec. 30 and 31st.

The association has increased its legislative committee to five members and goes on record in favor of an independent board. Special resolutions were passed commending Dr. A. U. Jorris' work as a member of State Medical Board for eight years. The names of Drs. A. U. Jorris, F. N. Oium, W. B. Davis, W. L. Thompson and E. J. Elton were selected as a list from which the Governor will select one to succeed Dr. Jorris. Officers were elected as follows: President, J. E. Matson; vice-president, J. K. Schuster; the present secretary and treasurer were re-elected.

The speaker of the meeting was Dr. H. W. Forbes.

On Thursday p. m., Dr. C. W. Young of St. Paul addressed the convention on "The Mental Attitude of the Osteopath Toward his Profession," discussing his subject in his characteristic manner. The association will meet at Appleton next year, and expects to have a large delegation at Minneapolis next summer.

* * *

NORTHEAST MISSOURI DISTRICT MEETING A GREAT SUCCESS.

Nineteen hundred and nine started out exceedingly well, osteopathically, with the meeting of about two hundred field practitioners and as many students, who passed up the vacation to attend the meeting at Kirksville, January 1st and 2nd. Missouri, Iowa, Kansas, Illinois, Nebraska and a few other "Valley States" were represented, and no one went away feeling that either of osteopathy, clinics or hospital work, he had not received his full money's worth.

The Old Doctor himself, was very much in evidence both days and not only lectured but worked, much to the appreciation of the audience, some of whom had not been back to Kirksville for several years and were, therefore, both surprised and pleased to see the active part this remarkable man still takes in the school work.

The program committee, appointed to arrange all matters locally, consisted of Dr. R. E. Hamilton, who had general charge of the program, Dr. Earl Laughlin who had charge of the osteopathic clinical material and Dr. George Still, who had charge of the hospital work. Dr. Hamilton had sent a card to every osteopath in the radius of a few hundred miles, asking whom and what they wanted to see or hear and from the replies the program was arranged, to fill the two days. Only those things asked for were presented and nothing asked for was excluded for which there was time.

The following was the official program:

Northeastern Missouri Osteopathic Association

FRIDAY, JANUARY FIRST.

10:30 a. m.—Opening of the meeting and business.

10:30 to 12:00 a. m.—Physical Diagnosis, Clinic on Osteopathic Treatment of Heart Diseases, Drs. L. van H. Gerdine and R. E. Hamilton.

12:00 to 1:30—Noon Recess.

1:30 to 2:00 p. m.—Osteopathic Mechanics, Dr. F. P. Pratt.

2:30 to 3:00 p. m.—Osteopathic Treatment of Innominate Lesions, by Dr. F. G. Crowley.

(A report on two cases reduced under anesthesia during the A. O. A. convention), Dr. W. F. Pauly, Kahoka, Mo.

3:00 to 4:00 p. m.—Laboratory. Technique of Value to the Osteopathic Physician, Dr. R. E. Hamilton and Mr. Haight.

SATURDAY, JANUARY SECOND.

7:30 to 8:30 a. m.—Osteopathic Treatment of Fracture and Dislocation with Illustrations of the Commonest Fractures, Dr. George Still.

8:30 to 12:00 p. m.—Hospital and Surgical Clinics, Hysterectomy and Insanity, Varicose Saphenous Veins, Ovarian Tumor, Laceration of Perineum and Cervix, Hallux Valgus, Circumcision and Adenoids, Fibroid of the Uterus, Hypospadias, Talipes Calcaneus, Appendicitis, Tonsillitis, Fistula and Hemorrhoids, Carcinoma of the Uterus; Dr. George Still and assistants.

12:30 to 1:30 p. m.—Noon Recess.

1:30 to 3:00 p. m.—Osteopathic Clinics and Orthopedics, Dr. George Laughlin.

3:00 to 4:00 p. m.—Urinalysis of Interest to Osteopaths, Lecture, Dr. R. E. Hamilton.

4:00 to 4:30 p. m.—Report on Three Osteopathic Obstetric Cases, Dr. Wm. H. McCoach.

4:30 to 5:00 p. m.—Technique, Dr. Franklin Fiske.

7:30 to 9:00 p. m.—X-ray Demonstration, Dr. R. E. Hamilton.

It will be noticed that every subject on the program was very much osteopathic except the surgery clinics. Unfortunately Dr. Fiske was unable to attend the meeting and give his talk on Technique, on account of being detained in Indiana on professional business.

The following report of the first day's meeting was taken down by an osteopath reporter and published in the local paper:

Prominent Osteopaths From Several States Convened For Two Days Session With Northeast Missouri District Association.

The opening session Friday morning at 10:30 was attended by a large number of the members of the association from both Missouri and Iowa. Dr. R. E. Hamilton presiding, Dr. Emma Crossland of Grinnell, Iowa, secretary. A short business meeting was followed by a lecture upon Physical Diagnosis, Clinic and Osteopathic Treatment of Heart Diseases given by Dr. L. van H. Gerdine. Dr. Gerdine's prefatory remarks upon exhaustive physical diagnosis, in which all the good methods of the medical world together with the accurate methods of the osteopathic profession should be employed, were well taken; the value of recognition of the true condition of patients; differentiation of the causes and their effects together with latitude of reasoning and conclusions correctly based upon facts made the osteopaths superior as diagnosticians and of greater value in the profession and most reliable as the expert counselor. The physical diagnosis, and all good methods belong to the osteopath no less than to the drug man, and are not confined alone to bony structure, muscular action or functional activity but to all combined; the physician who will make accurate tests of all pathological conditions is the successful and confident doctor; vertebral lesions while important are only a part of diagnosis; a vertebral lesion may indicate lung trouble but will not give extent of lung cavity.

Dr. Gerdine then gave a concise lecture upon the structure, physical and pathological condition of the heart showing both the normal and abnormal relations to

other structures; primary and secondary cures and effects. Special points in making diagnosis were given with most accurate landmarks externally for the various pathological conditions to be found. His point in making a differential diagnosis using the systolic murmur in anemia as the valuable sign was greatly appreciated by all. His counsel in correct osteopathic treatment in the various heart complications with correct advice to the patient was another valuable point. A clinic for the visiting physicians was a case of valvular lesion which gave excellent demonstration of the opinions and practical suggestions advanced by Dr. Gerding, and concluded the morning session.

At 1:30 Dr. Pratt took up the work of the afternoon giving a lecture upon Osteopathic Mechanics, during which he spoke of the legislative recognitions as well as the numbers of grateful patients, whose hopeless cases had been made whole by simple osteopathic mechanical skill, being the evidences of the onward march of the science. Dr. Pratt skillfully compared spinal lesions and their pathological conditions with a simple sprain of the ankle joint, bringing out the similarity of cause and effect and treatment, emphasizing the value of recognition of correct diagnosis, and correct work in either condition.

Reference to the later French writers on medical science recommending mechanical treatment in all cases of traumatic conditions, was an example of the recognition given to the osteopathic principles by the advanced thinkers on medical research work.

Dr. Pratt then took up the anatomy of the spine showing its response to correct mechanics; the principles of application affecting both correct and incorrect treatments were demonstrated up a spinal column giving the audience many clear and valuable points for the work of applied mechanics.

Dr. Pratt concluded his demonstrations with two simple points in treatment, viz: Cervical Region; rotation along an oblique axis.

Thoracic Region; attempt to secure movement by extension or flexion or lateral bending; which were appreciated by physician and student alike for their force of simplicity in demonstration.

Dr. Earl Laughlin followed by giving a clinic in simple goitre, the patient, a man of thirty-five years, whose condition had been of four years standing. Under treatment the circumference of the goitre had been reduced one-half in six months, with steady improvement still progressing.

Dr. Laughlin gave causes of fibroid, simple and vascular and exophthalmic goitre, with the most effective treatment to the abnormalities found in, or of clavicle, first rib, scaleni muscles, and infrahyoid regions; he also gave new methods of treatment for this condition which have grown out of the clinical work at the infirmary in recent practice. Relaxation and stretching contracted muscles before treating the bony lesions being a valuable therapeutic point.

The reduction of innominate lesions was ably handled by Dr. Forrest G. Crowley, who, with a patient on the treating table demonstrated this most difficult problem in the daily work of the average physician. Dr. Crowley advanced some very new mechanical principles, readily understood, for the effective work upon this common structural perversion, which will make the innominate treatment of less concern to all.

Many in the audience would have enjoyed demonstrations upon additional lesions of this region had time permitted the doctor to have given more of his methods as applied to other conditions met with in daily practice.

The visiting physicians were invited to the pathological laboratories where Dr.

R. E. Hamilton assisted by Mr. Haight gave Laboratory Technique of Value to the Osteopathic Physician. The demonstration consisted of diagnosis by means of the microscope. Specimens of many of the pathological conditions arising from fatty degeneration, infiltration, heart failure, cloudy swelling, abscess of liver, and others were presented. The value of the diagnosis determined by blood analysis and blood count was also demonstrated concluding the first day's work.

At 7:30 p. m. the physicians and students were invited to the amphitheatre for a demonstration of diagnosis by use of the X-radiance appliances recently installed at the hospital. Dr. R. E. Hamilton gave a most valuable history of X-ray work from the discovery through the periods of the inventions of Crookes tubes and Edison's recent appliances to the present day uses in all modern hospitals, each part of the new machine was fully explained, together with its value as an adjunct in diagnosis. A patient who has been in Kirksville for the treatment of a dislocated and fractured hip of several years standing offered himself as a subject, for demonstration. Dr. Hamilton assisted by Dr. McCoach made a picture of the injured hip, which has recently been corrected at the hospital, to show the condition now existing since the reduction was made, concluding the evening's work.

Each train brought its quota during the day which will make the attendance tomorrow larger than usual to these mid-winter meetings.

The "Old Doctor" spent the opening day of the convention demonstrating to groups of physicians his recent work along the lines of osteopathic principles applied to smoke congestion; clearing out the tubes of a heating plant as he would the venous system of a malarial patient, by burning up the waste material for the good of the body machine. His busy brain is at work upon new ideas which crowd his daily thoughts, keeping all who are favored with his companionship and confidence busy and alert to the thoughts that become things, under his almost magic mechanism.

Second Day of Meeting.

The following report was also written by the reporter except the surgical case reports which have been furnished by Dr. George Still.

Saturday from seven o'clock in the morning until 2:30 in the afternoon the North Missouri Osteopaths and their visitors were given an exhibition of what the A. S. O. Hospital can do in the way of a surgical clinic, in a manner that satisfied all who were present. No other schools, even the medical schools this side of Chicago, are better prepared to show such work as was done by the A. S. O. Hospital corps Saturday.

During this seven and a half hours Dr. George A. Still and his assistants operated and demonstrated cases without intermission, and, in fact, it was the systematic work of the assistants which rendered possible the showing of so many cases without interruption, as follows: (An account of these cases is given on page 121)

By using three anesthetists, operating was continuous, one patient being prepared while bandages were in process with the preceding patient. Miss Cust had general charge of the preparation of each patient and nurses, Miss Morris, Miss Shreve, and Miss Moyers in the order named attended to the care of the patients until they were returned to their respective rooms and placed in charge of the special nurses. The physicians present were impressed with the technique of Miss Cust's work in bandaging and adjusting some difficult dressings in which the comfort and safety of the patient had been well studied.

Dr. Eugene Link started the anesthetics and as soon as a case was half completed turned the patient over to Dr. Earl Laughlin and Dr. Herman Still, who continued the anesthetic until the completion of the operation.

Dr. Forrest Crowley, who intends to become a surgeon, ably assisted Dr. George Still during each operation.

The operations gave as great a diversity and as great an average severity as can often be seen even at a surgical convention; the hospital is to be congratulated upon being able to handle such a series of operations. Those in the audience who had witnessed work in the hospitals of Chicago, New York and the famous Mayo Hospital of Rochester, Minn., expressed opinions highly complimentary to the work done Saturday, and all those present were not only greatly pleased but surprised at the advancement the hospital has made in the last two years.

Following the surgical clinic Dr. George Laughlin had a most interesting clinic of osteopathic orthopaedics. Two of the patients were of especial value to the physicians—one a case of paralysis following an accident four years ago in Iowa City. The patient a man of forty-four years, who had been treated by all known methods of medical science, was presented to Dr. Washburn of Iowa City as a last resort. After four weeks treatment, sensation to all parts of the lower limbs and paralyzed areas was restored. The diagnosis yesterday developed a remarkable condition of the regeneration begun and the prospect for an ultimate recovery of the use of the limbs.

A case of incipient Pott's disease in a young man of twenty-seven years, was demonstrated upon by Dr. A. T. Still assisted by Drs. George Laughlin and F. P. Pratt. The condition of the sacroiliac articulation was corrected which was followed by a partial reduction of the deformity in the lumbar region.

Dr. A. T. Still's principles used upon this case brought forth much enthusiasm on the part of the convention.

Dr. Wm. Smith being absent, Dr. W. H. McCoach gave a report upon three of the twenty-seven obstetrical cases conducted this school year; the first of which septic conditions gave rise to the complications dreaded by obstetricians; the case was carried through to successful recovery in five weeks.

The second case described was one in which the mother was sixteen years of age, with a history of forty-eight hours suffering before the physician brought the case to the hospital from a city in Southern Missouri. This case presented complications not welcomed in the practice of obstetrics. The mother had an uneventful recovery and was discharged from the hospital in nineteen days. This case was freely discussed by the visiting physicians during which time Dr. McCoach gave valuable hints upon the osteopathic treatment indicated and the results which can be secured.

The third case was that of ninth birth with previous bad obstetrical history and age together with indiscretions of patient and friends, notwithstanding which there was a recovery, at the usual time of discharge by the obstetrician.

Discussion also followed this case, led by Dr. Buddecke of St. Louis, as it was a type of many such patients the city physician must meet in obstetrical practice.

Dr. McCoach closed his remarks with an offer on part of the A. S. O. to the visiting physicians of the services of the obstetrical department to patients who would act as clinics; the offer included best obstetric care, trained nurse, board, room and traveling expenses in Missouri.

The closing number of the program was a lecture by Dr. R. E. Hamilton upon the subject, "Urinalysis of Interest to the Osteopath." The laboratory apparatus and methods of search for pathological conditions by simple yet effective agencies as given by the doctor made this lecture one of the most valuable and appreciated lectures of the convention.

The physicians' note books were everywhere in evidence, giving the convention the appearance of one of the daily lectures at school.

Dr. Hamilton placed more good points from his store house of information on this subject, in the hour, than could be obtained from months of reading. He covered the subjects of diabetes mellitus, cystitis, Bright's disease, both acute and chronic nephritis together with minor pathological conditions met in practice to the great appreciation of his hearers. (Dr. Hamilton furnished an article for the July '08 Journal of Osteopathy embodying these points.)

Although many of the physicians had begun the early morning hours with the surgical clinic they were still putting questions to Dr. Hamilton in the hall ways after the lecture just as they were wont to do in the good old school days.

Dr. George A. Still reported Sunday evening that the twelve cases who were operated upon during the convention were all in favorable conditions for good recovery.

* * *

A. S. O. COMMENCEMENT.

The graduating exercises of the famous "Skidoo Class" of the A. S. O. occurred during the week of January 17-23. On January 17, Rev. Templeton preached the doctorate sermon at the First Presbyterian Church. In lieu of class day most of the members wrote on the Missouri state board examination. This class entered the A. S. O. with twenty-three members and with the changes that must inevitably occur, graduated the same number. They waited accordingly until the 23rd, to hold their exercises which commenced promptly at twenty-three minutes past ten.

The invocation was delivered by Rev. Everly, after which Dr. C. E. Still said "We meet here to graduate to-day the famous twenty-three class, the only one of its kind in captivity, which graduated with exactly the same number present as at the beginning. It reminds me of a story of the young man whose bride told him he should be a model husband and he found that meant a good imitation of the real article, so this class is a good imitation of our ordinary big classes, but they have learned osteopathy and since they know it I know they will achieve success."

Address of Walter Williams.

Dr. Walter Williams, the Dean of the School of Journalism at the University of Missouri, gave the class address choosing as his subject, "Hospitality." He said in substance "It is my high privilege again to speak to you and say a word of commendation and appreciation of the good work done and to be done by the American School of Osteopathy. It is an occasion of joy to come on the graduation of a class so unique and intellectual. But sorrow comes with joy and in the illness of our friends, the members of this class are brought to greater usefulness, in fact their highest mission is to lessen sorrow and to increase joy.

The highest honor of an individual is to be a guest. Anyone can call Dr. Still to the door to solve a problem but not every body can be invited in as a guest. General hospitality is an ancient and perhaps a forgotten art. Tables groan heaviest and feather beds are thickest the farthest we are from civilization, formerly the latch string hung on the outside, now the yale lock is on the inside and the householder carries the key in his pocket. When Timothy Flinn left Maine for the United State and met at the ancient city of St. Charles, Mo., (now celebrating its hundredth anniversary) a French settler, he asked for a hotel, and the man did not know what he meant. General Robert Toombs of Georgia was asked to subscribe for building

a hotel and he said "Why do we need one? If a respectable person comes I take him to my house, and we want none who is not respectable," Now-a-days, the stranger comes to the hotel and is known as number 67 or 76 or 23 and not as an individual.

There is need for hospitality; a new profession in sociology is that of friendly visiting. We need also friendly entertainment, not the barter and sale in the swapping of six and seven course dinners. A William Jewel College professor has written a book to prove that we eat the Lord's supper at every meal and that hospitality is worship. Men are sometimes drawn nearer to Heaven by a meal than by a sermon. At mealtime often is the only family association. Physiologists are able to perform an experiment by which they may see the human heart beat. The family heart can be seen beating when one is the guest of honor in a home. I have walked the earth and seen the most impressive forms of worship in the world as typified by the Archbishop of Canterbury in London and the Holy Father of the Roman Church at Rome but never have I seen a higher form than I witnessed in a humble cottage not far from this little Missouri city. When after an evening chat with the family the father turned to his bright eyed daughter and she understanding his looks quickly brought him the well worn family Bible from which he read the evening lesson.

Some of our homes are open to the physical guests that come but not to the guest of a new idea. In the walk to Emmaus when Cleopus and one other, whom I am sure was his wife, received at meat the Saviour they received as guests not only the individual but the idea.

A man is known by the guests he receives. When the Sistine Madonna was brought to Dresden there was no place found worthy of this picture and the King directed that the throne should be moved to give it a worthy place. A Boston young woman was married and moved to a ranch in Montana a hundred miles distant from any railroad station and her Wellesley chum thinking of some gift sent her a dainty, delicate and expensive vase. The friend was reproached for sending this but later, when the exiled woman came back to Boston, in deepest gratitude she told of what service this had been. She had built a mantle and on it had placed the vase and whenever she felt inclined to become slovenly or careless she looked at the vase, dressed herself up in her best garments and walked up and down the room and in that way by this one single tie kept herself joined to her former life of refinement. We are told by our guests of honor. A man may bar and bolt his house but he who bars and bolts his mind is unworthy of living.

For my message to this class, I can best quote the prayer of a Jewish Rabbi which he gave at the dedication of the home of a new couple. He prayed that they should live, and have for guests joy and sorrow, sorrow and joy; for only those who know sorrow value joy. He prayed that they should bring forbearance to the parlor, for those who came to the parlor must needs be met with forbearance. Cheer for the

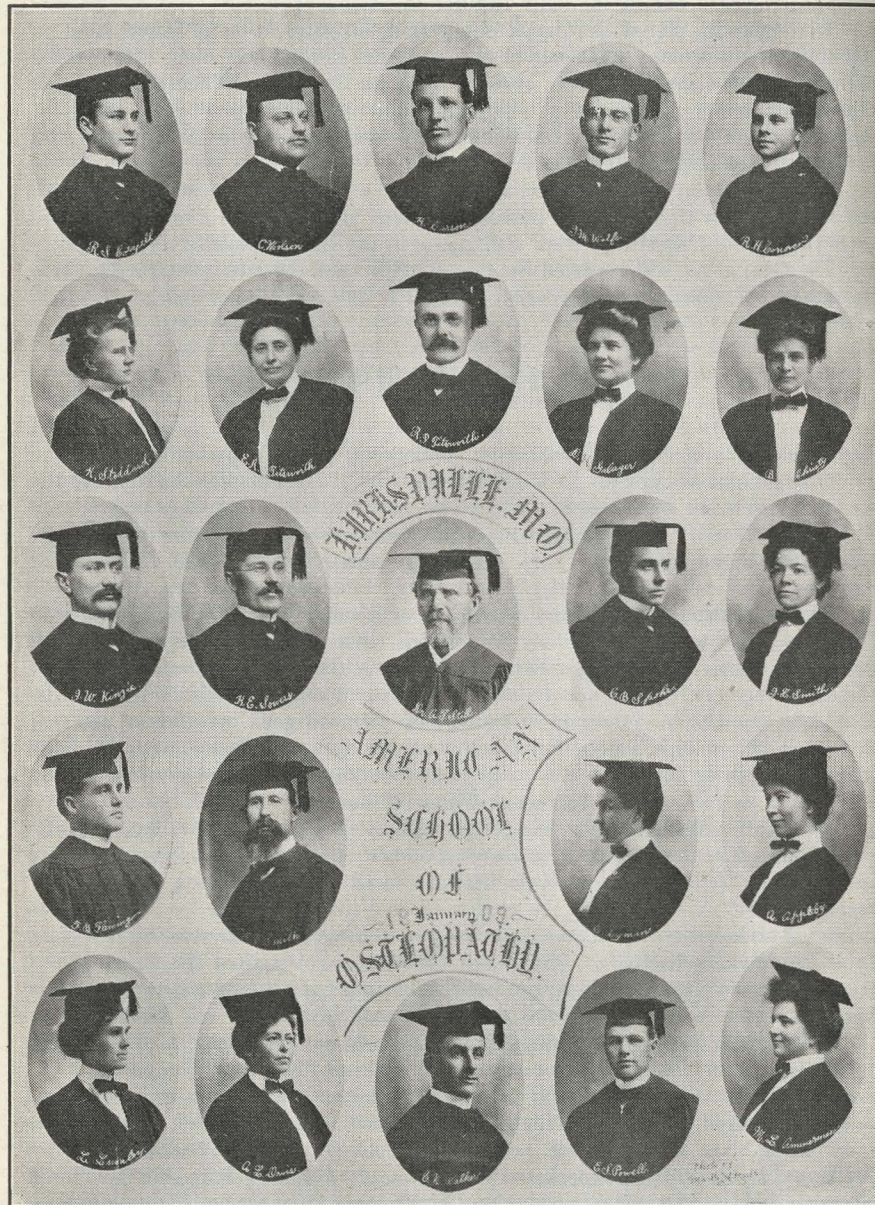


Photo by Marble & Marble.

Key to Class Picture—First Row—R. S. Coryell, Clement Woolson, Henry Carson, J. M. Wolf, M. D., R. H. Conover.

Second Row—Katharine Stoddard, Eliza A. Tittsworth, R. F. Tittsworth, (Pres.), Dolly Gallagher, Belle Christy.

Third Row—J. W. Kinzie, H. E. Sowers, C. B. Spohr, Julia L. Smith.

Fourth Row—F. B. Fleming, W. B. Smith, Elva Lyman, Anna Appleby.

Fifth Row—Leila Lumley, Anne L. Davis, C. N. Walker, E. S. Powell, Margaret L. Ammerman.

dining room, for cheer is needed for appetite and a little eaten with cheer is better than much without. But for the living room was needed Love, always love as love is the guest that should bring us closest together in a family. But the guest of honor to every room, parlor, and dining room and living room should be Service, the chief guest for each one of us.

To this class I would say in our offices and in our parlors as we meet the world let us bring forbearance, let us have cheer at meat and love in our living room but in all and through all, whatever may come, let our chief guest of honor be "Service."

Address of A. T. Still.

Dr. Still addressed the class in substance, as follows:

Thirty-five years ago I received my commission, I was notified then that there was a great battle before me, and to-day you receive your commission for the battle of life. At that time it was said to me "Here, Andrew, you are to aid America and the world in a great battle. Attention worlds! Into line by nations! Fire by states, divisions, brigades, regiments, companies and squads!" Is your God the God of Osteopathy, of all creation? Was he truthful when he made man, and endowed him with intelligence and said "It is good." Know thyself, and be at peace with God, which means knowing the anatomy, physiology, and chemistry of life, which he gave you as the book of knowledge. He is the Great Architect of the universe. His laws are simple, if you comprehend them. Simple laws of astronomy, chemistry, f navigation; nothing is complex, if you can but know it.

(Holding up a stone dart). The man does not live who can make this dart. The savage understood how to heat this stone and cool it, to draw out splinter after splinter and make the dart. He understood that cold is electric and magnetic. Nature stands ready to fight our battles.

We are now establishing hotels, and we have established other hells—drug-stores—shame on you if you go to them with a bottle for whiskey, and a bottle for morphine. Remember you are members of the Church of Life, and believe in the perfection of God. That what He has made is perfect and does not need to be doped up from the outside. In neuralgia straighten that bone, let loose that nerve that is burning up the body with fever and do not show your ignorance of cause and effect by going to a drug store.

When you go out, go out for business, not for talk, or for ads; remove that goitre and that will bring you both the patient and her friends. I have treated now for thirty-five years, I have not advertised, nor have I gone into the papers.

Don't buy two autos before you can pay for one. Don't join your church before you look it over. If the Catholics are the strongest church join them, if not look around until you find the most popular church and join that. Don't be as the doctor who said, "My highest aspiration is Heaven. My daily prayer is that my devotional hours be not intruded upon by my professional duties, as they were in the East."

As a professional man devote your highest energies to your work, and give forth your best efforts. Be honest in all things and you will achieve Heaven, and maybe you can get three autos if you think best.

Those receiving the degrees were: Ammerman, Margaret, Appleby, Anne; Carson, Henry; Christy, Belle; Conover, R. H.; Coryell, R. S.; Davis, Anna L.; Fleming, F. B.; Gallagher, Dollie; Kinzie, J. W.; Lumley, Leila; Lyman, Elva; Powell, E. S.; Smith, Julia L.; Smith, W. E.; Sowers, H. E.; Spohr, C. D.; Stoddard, Katharine; Tittsworth, Eliza A.; Tittsworth, R. F.; Walker, C. N.; Wolf, J. M., M. D.; Woolson, Clement.

OUTLINE OF SURGICAL CLINICS JAN. 2, 1909.

Case 1. Mrs. D. patient of senior student Derek.

Symptoms: Insanity, following child-birth, with history of relief for few weeks, a year and a half ago, following a suspension of the uterus. At present the examination of the uterus shows it to be again prolapsed and swollen, the "suspension" having given away. Also the ligaments are so atonic that treatment has little effect; same result with tampons. Ovaries show cystic degeneration. Indications: Panhysterectomy through the abdominal wall, with removal of old scar.

Operative findings: Enlarged fundus attached to scar on linea alba by ligament, about two and one-half inches long and size of lead pencil. Ligament, due to pulling out of peritoneal attachment, and containing unabsorbed sutures, which included too little of the wall. Ovaries cystic. Results: Wound healing perfect. Mental condition much improved and patient apparently sane at present.

Beginning with patient of Dr. Julia Frey two years ago, seven very similar cases have shown but one failure.

Case 2. Mr. S., patient of Dr. Murray of Elgin, Ill., with stiff elbow, following operation on fracture, at Chicago, two years ago. Head of the radius was removed.

Results: Adhesions broken without cutting and patient sent home next day with instructions to take daily massage and passive movements, from physician.

Third case: Patient of Dr. W. H. Brown, Maryville, Mo. Brought to hospital from asylum. Similar in most respects to case 3, but no previous operation. Panhysterectomy performed.

Results: Very little mental improvement to date. Wound healing perfect. In a former case, two months elapsed before mental condition changed.

Case 4. Mrs., patient of Dr. Grace Urban, of Maquoketa, Iowa, ankylosis of knee following typhoid seven years ago.

Results: Complete breaking of adhesions with cutting. Patient sent home in week, with instructions to take daily massage and passive movements.

Case 5. Mrs. A., patient of Dr. E. J. Aege of Washington, Indiana. Hallux valgus of both first metatarsals, plus rheumatic deformity.

Operation and results. Exostoses cut off and deformity reduced, condition good.

Case 6. Mrs. B., patient of Drs. Pitts & Pitts of Bloomington, Ill. Cystic tumefaction of ovary and pyosalpinx.

Operation and results: Excision of tube and ovary with perfect healing.

Case 7. Mr. S., patient of Dr. E. R. Smith, of Lyons, Kansas. Hypospadias corrected and circumcision to cure enuresis. Results good. Enuresis cured.

Case 8. Circumcision and adenoids removed. Results O. K.

Case 9. Same. Results, O. K., as usual.

Case 10. Patient of Dr. Bell of Independence, Kansas. T. B. of uterus, not operated on because of nephritis, etc., which will be treated at hospital.

Case 11. Mrs. M., patient of Dr. McCoach. Fistula and hemorrhoids. Not operated on because of menstruation having just started.

Case 12. Student patient with tonsillitis. Postponed for further treatment.

Case 13. Patient of Dr. P. L. Davis of Albia, Ia. Tonsillitis. Guillotined both tonsils. Patient went home same night.

Case 14. Bilateral talipes equino varus postponed on account of bronchitis.

Case 15. Varicose saphenous veins. About two feet of veins excised altogether, the rest being left for treatment, not being very bad. Healing good.

Case 16. Mrs. K., patient of Drs. Bell of Independence, Kansas. Metrorrhagia from internal fibroids, uterine prolapsus; one degenerated ovary and pendulous abdo-

men. Operation and results. Left ovary and fibroids removed, uterus suspended, strip of fat cut out of abdominal wall. Healing good, in peritoneum and muscle, but fatty layer began to discharge freely on eighth day. Healing good even here, at present.

Case 17. Patient of Dr. Barber of Edmon, Okla., and Miss Mahaffey of Oklahoma City. Extensive carcinoma uterus. Inoperable, because "too late."

All these cases were in the hospital and those not operated on are mentioned to show why the surgeon or anesthetist refused them. GEORGE A. STILL.

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CHICAGO NOTES.

The meeting of January 9th was held at the Sherman Hotel, one of Chicago's leading hotels. What makes this meeting notable was the remarkable attendance of nearly the entire profession located in Chicago with a good representation from surrounding cities. Eighty-three guests at dinner and over one hundred in attendance at meetings afternoon and evening tells the story. If any one doubts the eagerness and hunger of osteopaths for knowledge he should have been present and seen the keen interest and attention given the speaker and lecture. The meeting was called for 2 p. m. and actually started at 2:30 p. m. and from this time to 10:30 p. m. it was in continuous session excepting dinner and a short business meeting.

Dr. H. W. Forbes was the principal speaker, choosing as his subject, "Lesions as Factor in the Causation of Disease."

Dr. H. H. Fryette was called upon to explain a novel and original preparation of the vertebrae for illustration in lectures or to show to prospective patients. It is as near a living vertebra as it is possible to obtain, showing the movements as made in life, giving a vivid picture of the damage done to the whole organism by impingement upon the veins, arteries, ligaments and nerves and how by turning and twisting of the spine the likelihood of injury to the visceral organs adjacent. We cannot make a detailed description at present but we hope Dr. Fryette will write out an account of his work and have it printed in the Journal for the benefit of the profession. Dr. Fryette in his remarks generously declared he had no patent on his invention and he would freely give the result of his labors to his fellow osteopaths.

Among the guests at dinner, clinics and lecture were eleven students from the Littlejohn College and out of town practitioners including Drs. McNary and wife, Milwaukee, Wis.; Turfler, Renselaer, Ind.; Julia A. Fogarty, Michigan City, Ind.; Lola Hayes, Moline, Ill.; Halliday & Hemstreet, Galesburg, Ill.; E. M. Browne and wife, Dixon, Ill.; C. C. Crampton, Kankakee, Ill.; Maginnis, Aurora, Ill.; Todson, Elgin, Ill.; Bischoff, Waukegan, Ill.

At the short business meeting quite a number of names for membership in the Chicago Osteopathic Association were presented.

Dr. Gage spoke on the subject of legislation. "He said on account of factions in the Illinois Legislature it was deemed best to keep quiet at present. That we did not want to spend money at present though we had the bill drawn and attorney selected to represent us." As soon as harmony was restored in the legislature action would be taken.

Dr. J. Martin Littlejohn attended the Ohio State meeting at Toledo, Ohio, and delivered a public lecture on the evening of Jan. 7th in the Hotel Secor. About 350 people were present and the lecture was on the subject of "Osteopathy in Relation to Public Health." The principle emphasized was that osteopathy meant adjustment, with a basic foundation in biology, anatomy, physiology and hygiene. On the

basis of this foundation principle the method of adjustment is correction. This brings the osteopathic physician into direct relation with the individual as well as the public health and makes the osteopath not only a director of health but a scientist in the truest sense of the term. His researches are brought down to the bedrock of correction with a view to adjustment for the purpose of promoting the health and happiness of the individual and the community.

An entirely new physiological and bacteriological equipment has been added to the Littlejohn College by importation from Europe.

Dr. H. H. Fryette, professor of Neurology, has prepared a spinal column, articulated and built so as to demonstrate the types of lesion taking place—the spinal field. This he uses in demonstrating clinical cases for the lesion side.

A new dining room is being fitted in the Littlejohn Hospital. Also a clinical demonstration room and a room for the eye, ear, nose and throat work. This will complete the hospital equipment for demonstration along osteopathic surgical and specialty lines.

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PACIFIC COAST NOTES.

Dr. Ernest A. Plant, who has made his headquarters in the Mason Building for the past three years has removed to Escondido, where he is enjoying a lucrative practice. Dr. Plant visited this locality during the summer and became so enamored with its rural beauties that he was led to change his position in Los Angeles for the present location.

Dr. J. C. Goodell of Covina has joined Dr. Plant in his new location to help him care for his extensive practice.

At our regular meeting of the Los Angeles City and County Osteopathic Medical Association Dr. Allison gave an account of a remarkable case of hydramnios. The case was a multipara, this being the third child. The mother is a stout, healthy young woman, twenty-four years of age. The abnormal size due to excess of amniotic fluid caused some apprehension as to the outcome of the delivery. Labor began about three o'clock in the afternoon continuing until about ten o'clock in the evening. As there was perfect dilatation of the cervix the lack of progress in delivery seemed mysterious. On making a final examination, by accident the bag of waters was punctured, and the delivery immediately followed. Four gallons of amniotic fluid was caught in a receptacle. The point of interest is to determine the cause of this excess of fluid. As the mother enjoys usual health and has no hereditary disease, from the authorities on the subject she would have to be eliminated from the discussion. The child appeared as strong as the average child at birth, but on examination it was found that the gluteal muscles were undeveloped and the rectum was absent, and as the penis was grown to the scrotum it seems that we will have to eliminate the child also as a factor. Dr. Allison's conclusion was that this abnormality was the result of an innominate lesion which produced scoliosis in the lower lumbar region bringing a tightness on the opposite side in the lower thoracic region crossing over again to the middle and upper thoracic on the opposite side thus affecting the nutritional centers involved. Will anyone please explain.

The next state convention is already occupying the attention of the osteopathic fraternity. This convention is to be held in San Diego; the exact time is not yet fixed but it will probably be held some time in May. Most members of the Los Angeles delegation will go to San Diego by boat.

Dr. Olive Clarke, professor of gynecology in the Pacific College, is expecting to

go to Vienna during the spring for further study and observation along her special line of work. During her stay in Europe she hopes to get her forth-coming text book in gynecology well under way. She will return in the fall greatly enriched by her six months study and observation.

The commencement exercises of the Pacific College of Osteopathy will be held on the evening of February fourth at the Friday morning Club House in Los Angeles.

Los Angeles County Association.

The January meeting of the Los Angeles County Association was held on January 19th at The Pacific College of Osteopathy. The paper of the evening was given by Dr. Olive Clarke upon "Some Mistakes I have Made in Diagnosis." The paper was really a series of reports of cases simulating various forms of uterine fibroids. This diagnosis was made in one case in which both ovaries were cystic and very hard and were firmly bound down with the inflamed tubes to the posterior uterine wall; in another case in which both ovaries were occupied by dermoid cysts; in a third case the left ovary and tube were infected and closely bound by unusually dense adhesions to the posterior uterine wall; in a fourth an enormous hematoma, with the blood clotted and partially organized, filled the pouch of Douglas and led to the diagnosis of sub-peritoneal fibroid. In another case an enlarged abdomen, cessation of menses, nausea, and the presence of milk in the swollen breasts, together with a small uterus, normally placed, led to a diagnosis of ectopic gestation. Laparotomy showed two cystic ovaries, no pregnancy. In all of these cases the diagnosis was made only after the most careful and painstaking examinations. In several cases the diagnosis had been confirmed by other physicians and surgeons.

We are so accustomed to being refreshed by the remarkable accuracy of the diagnosis of physicians and by the remarkable success which has attended their efforts for the afflicted that we are able to bear the chilling effects of some mistakes which are honestly acknowledged. Seriously speaking few things tend to bring physicians in general into greater disrepute than their unwillingness to acknowledge the mistakes which it is well known that they make. It is true that Time and the grave digger bury most of their mistakes but enough remain above ground to convince any sensible person that the mistakes are plentiful and it is refreshing occasionally to hear a physician make an honest confession. The meeting was well attended and the lecture highly appreciated. * * *

MASSACHUSETTS NOTES.

At the regular meeting of the State Society held Jan. 2nd a genuine agreement between the two wings of the osteopathic fraternity was made. Dr. Mayes, the osteopathic representative on the State Board of Registration in Medicine, was present, and largely through his stand for square play for all osteopaths who might appear before that board, and because of a sincere desire on the part of all concerned to get together, it was unanimously decided to go ahead unitedly on the proposed legislation. The text of this was printed in the November number of the Journal, and calls for the removal of osteopaths from the list of those exempted from the law, (thus compelling all D. O's. hereafter to take the examinations of the Board of Registration in Medicine) and makes provision for the registration of "any person who shall have been actively engaged in the practice of osteopathy in this Commonwealth prior to July 1, 1908, and who shall present to the Board of Registration in Medicine satisfactory evidence that he is a graduate in good standing of a regularly conducted school or college of osteopathy which has been recognized by the A. O. A." Fee for registering under this clause, \$10.00, application to be made before July 1, 1909.

With a united front there should be no difficulty in getting this bill. It is so logical a step from the present situation that the M. D's. will have trouble in finding arguments to combat it.

The Athletic Association of the M. C. O. held a dance at the Newtowne Club, Cambridge, on the evening of Jan. 21st, '09. Fifty couples were in attendance and an orchestra of five pieces furnished the evening's music. Matrons were Mrs. W. E. Harris, Dr. Grace B. Taplin, and Dr. Nell Cutler Crawford.

Drs. J. Oliver and Blanche Wilkins Sartwell have removed from Salem to 190 Westford St., Lowell. Dr. J. O. Sartwell will still go to Salem twice a week, having an office in the Naumkeag Bldg., Essex St.

At the regular meeting of the Boston Homeopathic Society held in the hall of the Boston Society of Natural History, Dec. 3rd, '08, the following program was given:

"What is Medicine?"

From the Standpoints of Education and Legislation.

John P. Sutherland, M. D., Dean of Boston University School of Medicine.

William E. Huntington, LL. D., President of Boston University, will discuss the subject from the Educational Standpoint.

Edmund A. Whitman, A. M., LL. B., President of the New England Hahnemann Association, will discuss the legal aspects of the question.

Richard C. Cabot, M. D., Professor of Clinical Medicine, Harvard University, will speak on Psycho-Therapeutics.

The Rev. Elwood Worcester, D. D., Ph. D., will speak on the Relationship of Psycho-Therapy to Medical Sciences.

Howard T. Crawford, A. B., D. O., Dean of the Massachusetts College of Osteopathy, will speak on the Relationship of Osteopathy to Medical Sciences.

The paper of Dr. Sutherland was exceeding able and was most interestingly discussed by the succeeding speakers. Dr. Cabot made a very able defense of the so-called Emmanuel Movement, which has been severely criticized in the medical press recently. Dr. Worcester was unfortunately not present. Dr. Crawford's presentation of osteopathy was concise, logical and convincing, and provoked several questions in the general discussion which followed. At all events the 200 or more homeopaths present were made acquainted with the bed rock principles of osteopathy and with the fact that osteopaths are physicians, not faddists.

The Boston Osteopathic Society held its regular monthly meeting Saturday evening January 16th, with Dr. C. E. Achorn in the chair. Dr. A. W. Rogers made an interesting report on the progress of the clinic being conducted at 5 Oxford Terrace under the auspices of the society. He gave in detail a number of the cases treated, the lesions found, and the progress made in each case. Particular attention is paid to the bony lesion idea, and so far much good has resulted. Only the most thorough osteopathic methods are used or allowed in the clinic. So far the clinic has exceeded fondest expectations of the members and the society, and the ultimate good to be derived from it will go far in teaching the people of Boston and vicinity what genuine osteopathy is.

At the January meeting of the Woman's Osteopathic Club of Boston, held at the office of Dr. Helen G. Sheehan, 687 Boylston Street, Friday evening, Jan. 15th, a most enjoyable and instructive evening was passed. The chief topic of discussion was the "Liver." Dr. Sheehan opened the meeting with an interesting paper on

the liver, speaking of its anatomy and physiology. Then Dr. K. G. Tallant gave a pathological study of the liver and pointed out some other interesting details.

The third popular lecture on osteopathy under the direction of the Boston Osteopathic Society was held in Huntington Chambers Hall, Boston, Saturday evening, January 9th. Dr. Mark Shrum of Lynn spoke on "Osteopathy in Acute Diseases." He said he had been a practicing physician in medicine for five years and subsequently embraced the practice of osteopathy after being convinced that it was the better method of healing. Since practicing osteopathy Dr. Shrum has been one of the leaders of the profession in New England, and has made some remarkable cures by purely osteopathic methods. He dwelt at length on pneumonia, typhoid fever, diphtheria, and scarlet fever, and pointed out specifically to the audience how osteopathy would handle such cases and what has been done in many individual cases. After his lecture Dr. Shrum answered a number of interesting questions most satisfactorily to his listeners.

Dr. Alexander F. McWilliams was married to Miss Eleanor M. Batstone, daughter of Mr. and Mrs. Wm. Batstone of West Newton, Mass., in New York City, Wednesday evening, January 23. Dr. McWilliams and his bride passed a brief honeymoon in the South, and are residing temporarily in the Copley Square Hotel until their new home in Allston, Mass., is ready for their occupancy.

Dr. McWilliams is a graduate of the A. S. O., class of June, '04, and while in college was one of the football stars and popular with all. Miss Batstone is one of the most estimable young women of her home city.

Dr. Mary M. Goodwin of the Ilkley, 176 Huntington Ave., is taking a course in the College of Physicians and Surgeons.

Dr. W. W. Caswell of 755 Boylston St., is taking work at Tufts Medical School.

Harmony was the watch-word at the January meeting of the Massachusetts Osteopathic Society. Not for years has there been such a unanimity of spirit, and the members found no "nigger in the wood-pile." The members are working as a united body for the success of legislation, and it is hoped that the osteopathic bill presented to the legislature will this year become a law. A change in the constitution was submitted and will be taken up at the next meeting.

At the fourth popular lecture under the direction of the Boston Osteopathic Society, to be held February 6th in Huntington Chambers Hall, Dr. Ellen B. Ligon of New York will be the speaker. She will talk to women only at an afternoon meeting. At the evening meeting she will talk on osteopathy.

Dr. Carl P. McConnell, of Chicago, will give a scientific lecture before the members of the Boston Osteopathic Society, Wednesday, February 17th.

Members of the Boston Osteopathic Society have organized the Boston Osteopathic Hospital Association for the purpose of carrying on clinic work along osteopathic lines.

An outpatient department has been opened at 5 Oxford Terrace, and in the few weeks of its existence it has exceeded the most sanguine hopes of its organizers.

Many patients who cannot afford private treatment have felt already the benefits of the institution.

Scientific work only is the method employed and the lesion idea is carried out.

The staff is made up of doctors who believe thoroughly in the non-drug system and no unnecessary adjuncts are allowed in the institution.

The outpatient department will be open three days a week for the admission of new patients and every day except Sunday for treatment.

Membership on the staff is not confined to members of the Boston Osteopathic Society, but is open to all competent graduates of osteopathic colleges recognized by the A. O. A. and all treatment will be administered by graduate osteopaths.

The board of directors consists of Dr. A. F. McWilliams, Dr. A. W. Rogers, Dr. Mary A. Heard, Dr. Ada A. Achorn, and Dr. R. K. Smith.

The Women's Osteopathic Club of Boston is holding meetings regularly along scientific lines, and at the last meeting held at the home of Dr. Ada A. Achorn, Friday the 18th of December, there was a discussion on hip lesions. Dr. Ada Achorn demonstrated on slipped innominates and sciatica and diseases of the pelvis. Then an open parliament followed.

Dr. Lyman W. Wilkins, formerly of Brookline, a graduate of the June, '05 class of the A. S. O. has gone into the undertaking business at Augusta, Me., succeeding his father-in-law.

Dr. Kendall L. Achorn of Boston, is taking post-graduate work at the Harvard Medical School.

Dr. J. Oliver Sartwell of Salem, has opened a branch office in Lowell, where he will practice three days a week.

* * *

They are a Good Advertising Medium—Several of the practitioners are using Lovett's Lateral Curvature and Round Shoulders as a basis for advertising. This is certainly an osteopathic work. It was reviewed some time ago in the Journal.

A Quick Cure—On one occasion an ignorant quack was called by mistake to attend a council of physicians in a critical case. After considerable discussion, the opinion was expressed by one that the patient was convalescent. "Convalescent!" said the quack, "why, that's nothing serious. I have cured convalescence in twenty-hours."—Harper's Magazine.

* * *

ON SEVERAL OF US EDITORS.

Doctor Bing knows everything
That doctor's need to know:
He sells a wealth of printed health
To M. D's. and D. O.
He publishes the Pneumopath,
And when the skies are fair,
He starts a muss—then stops the fuss
By a simple change of air.
Dr. Bing has done this thing,
Sitting in his office chair.

* * *

NEWS NOTES AND COMMENTS.

Opens Branch Office—Dr. F. N. McHolland of Olympia, Washington, has opened a branch office at Shelton, Wash.

Stockholders' Meeting—A meeting of stockholders of the P. C. O. was scheduled for five p. m., Monday, January 11th.

Gets Out Good Booklet—Dr. P. T. Corbin has published a neat little fourteen page booklet for his practice in Anadarko, Okla.

Forms Partnership—Dr. T. L. Davis, of Atlanta, Ga., has formed a partnership with Dr. J. W. Gorin, formerly of Brunswick, Ga.

Again in Practice—Dr. Harriet A. Whitehead has resumed her practice at Wausau, Wis., after four months absence caused by typhoid fever.

Blacks to Fight White Plague—It is well known that the negro race is very susceptible to tuberculosis. They have organized a congress to fight it.

Gives Up Canadian Practice—Dr. Helen Valens is devoting practically all of her time to her practice in Detroit, going to Windsor only by appointment.

Visits in Kansas—Dr. Laura B. Betz, of Los Angeles, Calif., is visiting her sister, Mrs. Willis, of Wichita, Kans., where she expects to remain for a few months.

Blind Professor Excels—Dr. R. W. Bowling is prominently mentioned in Los Angeles papers as passing the best grade in the late California examination.

Comments on Journal Article—The Los Angeles Times has a rather extended clipping from Dr. Riley D. Moore's Journal article on "Confessions of a Druggist."

Receives W. C. T. U. Appointment—The W. C. T. U. of the Joplin district appointed Dr. Martha Saunders Cox superintendent of Medical Temperance, Jan. 2nd, 1909.

Use Printer's Ink—The Washington osteopaths evidently appreciate the value of printer's ink, and are publishing interviews from Dr. Winter in the various papers throughout the state, favoring and explaining the Independent Board Bill.

Massachusetts Bill Introduced—January 21st the Washington Transcript noted the petition being filed in the House by Wilfred E. Harris and others which required the registration of osteopaths.

Nebraska Paper Gets Sarcasm—The Capitol, Lincoln, Nebr., Jan. 15th delivered itself of the following editorial sarcasm:

Another bill by Senator Tanner provides for a board of five members to examine applicants to practice osteopathy. Tanner really refers to the licensing of legpullers, a business very profitable in his home locality, and the word "osteopathy" has been slipped in under a misapprehension.

Now Takes Osteopathic Treatment—Fred A. Burnham, of Concord, N. H., sued for \$15000 alleging that on Thanksgiving day, 1905, he fell out of a walnut tree, fracturing his femur. But after 101 days in the hospital at his dismissal, he found that his leg was two inches shorter than it should be, and the knee stiff. The case was very bitterly fought there being many experts on each side. The plaintiff was awarded damages at \$5,750.

Los Angeles College Graduates—The Los Angeles College had their Doctorate address by Rev. Robert J. Burdette, Sunday, Jan. 24, and the graduating exercises Thursday evening, the 28th. The class roll is as follows:

Alpanalp, Emma C.; Andrews, Mabel E.; Biby, James E.; Copeland, Glen H.; Elders, Alva R.; Ghostley, Raymond C.; Goodfellow, Ferd; Kingsbury, Walter S.; McConnell, William F.; McNamara, James R.; Monatt, Albert P.; Nash, Victoria L.; Smythe, Elmer L.; Sturgeon, Sylph; White, Laertes T.

Christian Science Legal in Missouri—There is no law in Missouri prohibiting healing by members of the Christian Science Church, according to a decision by Judge Berry Thurmond in a test case at Warrensburg, Mo., Dec. 19.

Mrs. Lena A. Jacard and Theresa M. Heywood, Christian Science practitioners of Kansas City, were the defendants.

Information had been filed against them by Ewing Cockrell, prosecuting attorney of this county, charging them with violating the laws that make it an offense to practice medicine or surgery or in any other way to treat the sick for pay unless the practitioner had a medical license.

Returns to Practice—The Grand Rapids, Mich., papers tell of Dr. C. H. Jennings returning to his practice after a two months absence and state that he has enlarged his offices.

Gets Another Name—Dr. Elizabeth G. Seibert writes, "In sending my Journal please direct it to Dr. Elizabeth Grimes Seibert, as a few months ago I added another name to mine."

Directors of the New York Society—Albany dispatches name William B. Fitzwater and Charles H. Whitcomb as directors of the osteopathic society of the city of New York.

Changes Residence and Not Office—Dr. Wesley P. Dunnington writes that in the January Journal it should have been stated that it was his residence and not his office that he changed.

Is One of the Necessities of Life—In renewing his subscription Dr. H. K. Sherburne, who is moving into large offices, says of the Journal, "It is one of the osteopathic necessities of life."

Spends Holiday in Michigan—Dr. Leslie S. Keyes spent holiday week at Port Huron, and writes that he "had a dandy time, but could not escape examining a few cervicals while there."

Hold Examination in Oregon—The Portland Oregonian of Jan. 7th gives a list of 57 applicants taking the examination among whom are three osteopaths. The name of A. P. Davis closes the list.

Infected by Caressing Corpse—The Tacoma Washington Ledger tells of a patient of Dr. Chauncey G. Rust, who is ill probably as the effect of caressing the corpse of a friend. Blood poison is feared.

Scared by Skeleton—Waiters in a hotel in Chicago stumbled over some bones used in the demonstrations at the meeting of the Chicago Osteopathic Association and for a few minutes there was a lively scare.

Sells Practice—Dr. A. E. Freeman, of Cairo, Ill., has left his practice to go to Cameron, Ill., where he hopes to cure his niece. The splendid practice which he left is now in charge of R. H. Conover, of the senior class of the A. S. O.

Mechanical Osteopathy—An enterprising vibrator merchant in St. Louis is attempting to entrap the unwary by saying vibration is simply another term for rubbing, massage, and may also be defined as mechanical osteopathy. This is the latest dodge along this line.

Change of Name Certified—Reports in Chicago papers of Jan. 14 state that certificates are filed for the changing of the name of the American College of Osteopathic Medicine and Surgery to the Littlejohn College and Hospital as announced by the Journal some time since.

Osteopathic Office is Burned—On Dec. 15, the Holmes Bldg., of Galesburg, was burned and Dr. Hemstreet writes that all she saved from her office was her library, and she considered herself lucky to get that much. The Drs. Chapman in the same building lost the contents of their offices.

In Indiana on Professional Business—Dr. Franklin Fiske was called to Indiana during the holiday vacation and while in that neighborhood was entertained by osteopaths in Cincinnati and Indianapolis, and Danville, Ill. The osteopaths in these cities all appeared very prosperous.

Collins Case—Our Texas correspondents write "the latest in Collins case is: the prosecuting attorney dismissed all except one case, saying that he did not give drugs and the law did not apply to osteopaths. Then the next: his attorneys have filed habeas corpus proceedings and gone to a higher court."

Receives Insurance Appointment—Dr. Jessie A. Russell, Los Angeles, Calif., has recently been commissioned as examining physician for The Royal Court, a prominent fraternal insurance order with head offices in that city. Dr. Russell has the distinction of being the first osteopath commissioned by that order.

Takes a Trip to Jamaica—The Richmond club at Buffalo, on the evening of January 4th, took a trip to Jamaica, being conducted by Dr. A. B. Floyd, who used upward of a hundred stereopticon views from his own photographs, hand colored to bring out the beauties of the trip which he himself saw in person a short time since.

Damage Suit Filed—A patient has filed a suit against an Indiana osteopath and his assistant, claiming to have been injured by the assistant. It is said the suit was not filed until after the attempt was made to collect the unpaid bill, and it will be contested to the last court by the practitioner. It will probably not come up for trial before late in the Spring.

Will Tour With a Patient—Dr. Julia V. Frey has resigned her vice-presidency of the Denver City association and will travel. She writes, "I am going abroad with a lady patient for a year's travel. I expect to start this week for old Mexico. We will sail for Cuba, then, Nassau, New York, England, Scotland, Ireland, and I don't know where else from there."

Still Another Osteopathic Coroner—Dr. Polmeteer will have to divide up his honors with Dr. E. T. McLaughlin of Knoxville, Iowa, who like Dr. Polmeteer was a democratic candidate in a republican district and like him ran 200 ahead of his ticket and was elected. This makes three democratic osteopaths elected coroner in republican districts this year.

A Sad Commentary on the Profession—The Jaeger-Hillery Supply Company have gotten out a very clever catalog which excels in press work and arrangement but which contains some six pages of vibrator ads. A hard headed business concern does not advertise these, if the profession are not buying them. It looks like the contention of Mr. Archer in this issue is well founded.

Medics Organize in Jersey—The Philadelphia Telegraph contains the following dispatch from Millville, N. J., Jan. 14th:

"Representatives of the Cumberland County Medical Society will attend the New Jersey Legislature this year and make a strong fight to prevent osteopaths from being recognized the same as allopaths or homeopaths."

Neither Relative of Doctor Nor an Osteopath—Pittsburgh papers of early in January gave an account of one G. M. Grubb of McKeesport, who claimed to be an osteopath and who left a son named William. He was married when 76 years old to a 16 year old girl who deserted him a month after the wedding. Dr. W. L. Grubb of Pittsburgh states that he was not a relative of his nor even a graduate osteopath.

Chased Out by Drug Stores—Dr. A. W. Berrow, one of the osteopaths at Hot Springs, Arkansas, has been compelled to leave his offices on account of a drug store moving in below, but has been fortunate in securing the best location in the city. Dr. Berrow is anxious that osteopaths look up the various practitioners at Hot Springs before sending patients there, as otherwise the hotel keepers' trust would turn them over to M. D's.

Talks to the Junior Class—Dr. J. A. Grow, of Memphis, Mo., who from his quickness of wit, must have a considerable of mixture of Scotch-Irish, gave a talk to the Junior class recently in which he showed that osteopathy came only in the fullness of time. Other recent visitors at the A. S. O. are Drs. W. E. Beets of St. Joseph, Mo.; J. J. Drummond, Frankfort, Kans.; J. A. Dillon, Centerville, Ia.; S. D. Pemberton, Brooklyn, N. Y.

Secured Newspaper Writeup—The Los Angeles Examiner of Dec. 13 in a special edition has a cut of the P. C. O. and of "Prominent Osteopathic Physicians of Los Angeles." The article is credited to Dr. Charles A. Hammett. The photographs at the head of the article are those of Drs. W. Luther Holt, Dana B. Rockwell, Charles A. Hammett, Lavinia Price, G. Perry Long, Caroline S. Payne, Edwin F. Bagley, and James T. Best.

A Case of Other Women and Not Woman—The California papers state that Mrs. Mary S. McDaniel of Oakland claimed that Dr. A. C. embraced too many of his patients and even kissed an eighteen year old girl and said to her, "Goodby sweetheart." So she sued for a divorce, secured the custody of a minor child, and to prove that her heart was not broken, within a day was married to another man—Mr. Herbert M. Ashley.

Washington Chiro in Accident—One "Dr." Alma C. Arnold, of Washington, D. C., who was the woman arrested recently for practicing medicine without a license and with whose case the medics hoped to be able to harass the osteopathic practitioners was injured by her auto recently. She started to crank the engine without throwing out the clutch, and was pushed against a truck, fracturing several ribs, according to newspaper accounts.

Dr. Kirchner Misquoted—In a talk on advertising in the December Journal an article was mentioned which quoted Dr. Kirchner, of St. Louis, as saying very slighting things of osteopathy as follows: "What I think of osteopathy would not look well in print." A friend of the Doctor states that what he said in truth was, "as a physician I object to discussing osteopathy," and the reporter, irritated at getting no material from him quoted him as above.

History of Osteopathy—Dr. Lillian Courts, of Pontiac, Mich., January 4th, addressed the Womans' Literary Club on the subject of Osteopathy. In a write-up of the session, the press says:

"The address by Dr. Courts was of particular interest to the ladies, and very interesting. Dr. Courts spoke of the origin of that profession, its growth, its objects and its inestimable value to the human race, and of its unlimited scope."

Good Newspaper Service—Those who remember the wretched frost given the osteopaths by the Cleveland newspapers during the national convention there will be pleased to learn of the very good write-up which was given this year at the state meeting held at Toledo. The units were half columns and columns instead of half lines and lines as before. Good half tones of Drs. Hulett and Pierce were given. In Colorado the Denver papers had numerous extended accounts as was also the case with the papers in Eau Claire, Wis.

Goes Doctor Feidler One Better—Dr. W. T. Thomas, president of the Pierce County osteopathic society thinks that he can beat Dr. Feidler, and writes:

"I just read what Dr. Feidler of King County had to say about their society. Now I am proud of our Pierce County Osteopathic Society and I believe we can go him several better, there are 16 osteopaths in the county—15 belong to the county association and 13 belong to the state society, 8 belong to A. O. A. Now I should be glad to know if any county association can beat that."

Carbolic Acid Thrown—People over the United States were horrified on reading the papers along in Dec. of a woman in Washington, N. J., throwing carbolic acid into a doctor's face after attempting to shoot him, because he refused to treat her after she had been to a New York osteopath. A correspondent of the Journal on inquiry found this really happened, but says it was not as bad as the papers stated.

In his opinion it is a case of persecution. Our correspondent has promised to get the facts in the case and we will be able to publish them in the next issue.

First Solution to Acrostic—Dr. Lena C. Corkill, of Ward, Nebr., sent in the first correct solution to the acrostic in the January Journal as follows:

I just opened my January "Journal" this evening. Found the subscription blank which I was about to fill when I noticed the "Acrostic."

1. 'Os (hoss or horse—as Eng. say it.)
 2. te (tea)
 - 3 and 4. 'path (opath) or towpath Osteopath.
- Am I first? I know I'm right.

Preaches to Osteopaths—The Philadelphia Record gives account of the doctorate sermon at Philadelphia College in which the idea of service is emphasized as follows:

"To be really great, one must serve his fellow-men, and any attempt at self-seeking will be fatal to self-development. Ministering to others is the evidence of real greatness, and, although the care of self may be the first law of nature, to deny self is the first law of grace. We study our Lord as the great example of the truth."

The same theme is noticed in the address by Walter Williams as reported in this month's Journal.

Scores Drugs and Surgery—The Toledo Blade quotes the following from the State Convention:

"Osteopathy is based on principles of adjustment, the harmonizing of the parts of the body, and the greatest argument against the use of drugs is that drugs are foreign to the body and their injection produces a maladjustment rather than harmony."

Dr. Littlejohn scored modern surgery as butchery, and advised against appendicitis operations, declaring every organ of the body has its important function.

Finds Long Lost Brother—The Sheboygan, Wis., Telegram of Jan. 2, contains a half column account of finding the brother of Dr. W. H. Thompson, who for 34 years has been missing. Dr. Thompson was separated from his brother when a child, and for years had tried to find him when accidentally meeting a priest on the train between Sheboygan and Manitowoc, he learned of another orphanage; inquiring here he found the records, and through them located his brother, who lives at Minneapolis. Dr. Thompson is a native of Fairbault, Minn., and for a number of years has been a successful practitioner in Sheboygan, and is one of the leading osteopaths of Wisconsin.

The Latest From California—The Los Angeles Examiner in the Sacramento correspondence contains the following account of a medical bill proposed:

"The bill provides for the appointment of a commission which is to have headquarters at Sacramento. It is to consist of two professors from each of the leading medical colleges of the State, including the Eclectic and Osteopathic. One of the objects of the bill is to prevent advertising by physicians who claim to be able to cure certain classes of ailments. It provides that no persons can hold a position as physician in the hospitals, prisons or other institutions unless registered. It also establishes a fund for the prosecution of illegal practitioners."

A Legal Point of Interest—That an individual can not collect from a livery stable man when given a fractious horse, appears from the following account clipped from the Pasadena, Calif., News of January 12th:

"Mrs. Stella Walters of Pasadena brought suit in the Superior court for damages in the sum of \$5,100 against Edwin Hutchins because a horse she had rented from him had thrown her off, and striking on the curbstone she sustained injuries which

Osteopaths Endorse The Sheldon Spinal Appliance

DOCTORS of Osteopathy, being among the leaders in modern thought along the lines of healing, are naturally enthusiastic in their endorsement of the Sheldon Spinal Appliance. Osteopaths know the spine and spinal cord often are the real cause of many nervous diseases especially common among women and children. In the treatment of all diseases due to intervertebral nerve pressure, as well as the more serious spinal troubles, no other appliance or form of apparatus can be so effective as

Our No. 1 Sheldon Appliance

It weighs only a few ounces; is as easy to take off and put on as a coat; is removable at any time for purposes of cleanliness, examination or treatment; is as firm as steel where it should be firm and as flexible as whalebone where it should be flexible; is made only to order, from measurements taken by the attending doctor; adapts itself to every movement of the body and never chafes or irritates; and is easily adjusted from day to day as the patient improves.

The osteopath can find no other aid equal to the Sheldon Appliance in his treatment of spinal troubles.

Let us send you our descriptive literature and tell you what other osteopaths think and say of the Sheldon Appliance. We can help you in your work and our plan of co-operation will interest you. Address

Philo Burt Mfg Co.,

163 2ND ST.

Jamestown, N.Y.



laid her up for a period of three months during which time she had treatment at the hands of an osteopath physician. Mrs. Walters thought that the sum mentioned was sufficient to allay her feelings but when the matter came up yesterday in court, Judge Conrey, dismissed the suit holding that a livery-man could not be considered common carrier and therefore liable."

Dr. Bowling May Lose His Salary—The Des Moines Capitol of Jan. 11, contains the following:

"If Professor R. W. Bowling does not get a hurry on himself and file a cost bond in his suit for \$1,000 back-pay against the Still College of Osteopathy, he won't have a case against the college. The college this morning filed a motion in the district court to dismiss the case because of the professor's failure to file the cost bond as ordered by the court.

"Bowling brought suit against the college in which he had been teaching, averring that a conspiracy had been formed among the heads of the institution to "freeze" him out and make him throw up his job. They succeeded, he said, but they still owe him in the neighborhood of \$1,000. He started his suit to collect but thus far he has failed to back up his action by filing a cost bond as required by the court."

The head line writer evidently got mixed as he called it a suit against Drake.

Had Been Eating Dope—Either the reporter or the college authorities must have been eating dope when the account was prepared which appeared in the Des Moines Leader of Dec. 21st and which said:

"When J. W. Macklin graduates from Still College of Osteopathy next spring, he will enjoy the unique distinction of being the only blind osteopath doctor in the United States."

Without intending to belittle the gentleman's efforts it is only fair to say that he is far from being the first as Drs. J. K. Schuster, of 600 Milwaukee St., Milwaukee has been practicing since '01, Glenn B. Wheeler of Wahpeton, N. D., since '06, and F. P. Beslin of Aberdeen, S. D., since '07, while the profession remembers the contention in Iowa when J. R. Shrike was refused examination in Iowa on account of being blind. Then Dr. R. W. Bowling is known to practically the whole profession as both successful practitioner and teacher. There may be others yet who though blind are making successful practitioners.

Dr. Corbin Sells Out—The Malvern, Iowa, Leader of January 7th, says:

"The deal was made this week whereby Dr. M. E. Corbin, the well known osteopathic physician at this place, sells out his practice and residence property at this place to Dr. Elmer Estes, who has been associated with him for some time past, and his brother, Dr. Ray Estes, who is still at Kirksville in school. The former gets the residence and the latter the practice. The consideration for residence and practice was \$5000. Dr. Corbin remains here until spring, taking care of his part of the practice until the younger member of the new firm gets through his college work and then he expects to rest up until September, when he will go to Chicago and enter Rush medical school for a four years course in medicine and surgery, to better fit him for his life's work. Dr. Corbin has built up a splendid practice since coming to Malvern and has been very successful in his work. He is, moreover, a mighty good citizen and will be greatly missed from Malvern when he takes his leave. He will probably relocate here when he finishes his course."

Answers Inquiry About Osteopathy—The Washington, D. C., Times gives the following explanation of osteopathy in answer to an inquiry:

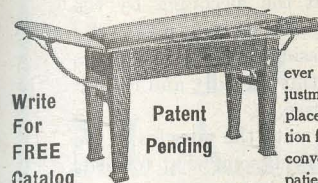
"The origin of osteopathy may be credited to one Andrew T. Still, of Kirksville, Mo. He first began the treatment in 1893, and so far as records go there is nothing to show that any one antedated him in its practice. Osteopathy is a method of treating disease by manipulation, for which its adherents pretend a universal curative.

The underlying principles of it are: That the fluids of the human body contain all chemical substances, organic and inorganic, and hence carry a store of all drugs necessary for checking and destroying any disease; restoration of health by natural processes can only be prevented by the displacement of some bone or bones, which would naturally form some obstruction to the flow of the drug-saturated fluids, therefore, to cure disease it is only necessary to find the displaced bone and restore it to its normal position by the process of manipulation."

To Cure Hiccoughs—Drs. Mossman send the following clipping which was illustrated with a half tone picture, which looked like an osteopath examining the cervical vertebrae and which was published in the Omaha Daily News.

"Did you ever take nine swallows of water to cure the hiccoughs? Do you remember the time some one scared the hiccoughs away by telling you of a whipping due for some meanness?"

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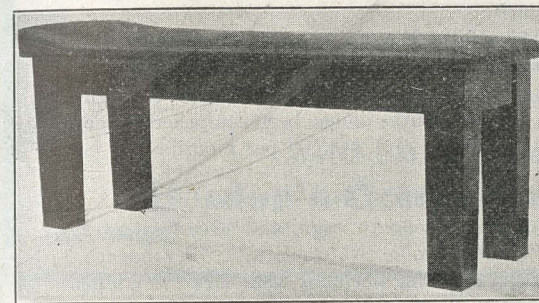
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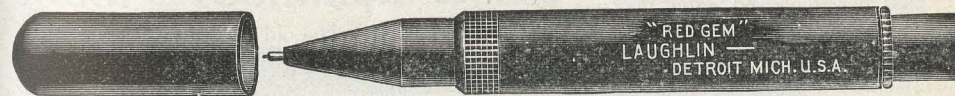
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KIRKSVILLE, MO.

Well, science has been studying hiccoughs and caught the hiccoughs by the "nape of the neck." The nine swallows of water had a little science in it, and so did the scare cure. The scientific hiccough cure consists in pressing down to numbness the nerves that connect the stomach, heart, lungs and brain, this partially and locally paralyzes this nerve and of necessity the hiccoughs must cease.

"Have the hiccoughing patient sit down and be at ease, with the muscles of the neck relaxed as much as possible. Grasp both sides of the neck somewhat towards the back part, and press down steadily and as hard as the subject may permit for about one minute, having the patient work the head from side to side. Within about one minute the nerve will be numbed and rested, and the spasmodic motion will cease. It may require longer pressure in some cases, but the result is sure if patience is maintained."

Ethical Practitioners Have Hard Time—A western practitioner and makes the following complaint, which certainly looks like there might be a number going contrary to our A. O. A. good rules on ethics.

Fakirs are skinning the regular osteopaths here to a finish.

Dr. ——— could not make a living here as an ethical D. O., tried to for over a year.

He then brazenly advertised in big double columns, got vibrators, hot air, lights, magnetic and electric apparatus, etc., in two months he has been compelled to move into larger quarters,—has five big rooms now—rent \$135.00 per month—and now has two assistants.

Hours instead of 10 to 4, now are 8 to 6, and 7 to 10 at night also.

A barber, "Dr."—first stuck up an "Osteopath" sign, and advertised everywhere. Has added "Chiroprath," "Neuropath," "Naturepath," "Psychopath," and several other "paths," and is doing a crowding business, while Mrs. ———, a genuine osteopath—3 year graduate from the Pacific—whose room is next to his has nothing to do but listen to the continual burr of his vibrator and watch the people pass her door and enter his.

A new comer osteopath here has a hard time of it. The old established osteopaths, of course, have considerable practice.

But think how much more we could have. People don't want the drug dopers, but cannot tell a silent genuine osteopath from a braying fake. They look alike, and in fact the noisy one seems to claim to be able to do more,—and does it for much less. The last item goes a long ways too. If our legislative campaign committee does not get us a law that will eliminate the fake I fear there will be more D. O's. turn fakes.

A Good Calendar Ad—Dr. Myrtle P. Morrison of Emporia, Kans., has presented her patients with a calendar on which is the following very appropriate verse:

What can't be cured must be endured
But why endure your pain,
When by a simple drugless art
You may be well again?
Let Nature's function be restored
Good health you will enjoy,
But if these functions are ignored
And you do not employ
The simple means which Nature
Has revealed to us so plain
Your search for Health and Happiness
Will surely be in vain.

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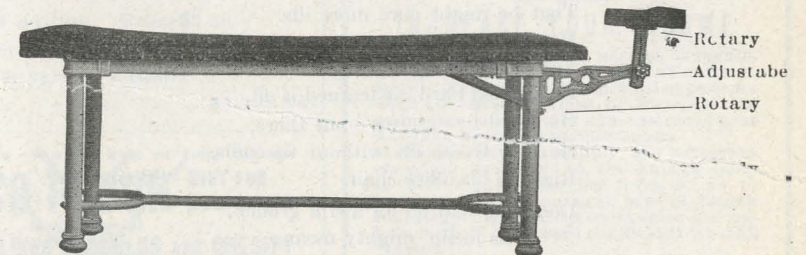
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the end of the table and swing his feet in the air at a cost of your own strength. Write for descriptive circulars and prices.

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Sanitarium Scheme Not Taken Seriously—Seattle papers had extensive accounts of a sanitarium scheme proposed which was to be in large of a woman by the name of Hammond, assisted by a Mrs. Brown, a Mrs. Burleigh, a Mrs. Kyle. Our correspondent states that it is not taken seriously, but is considered a bluff.

Asks About Osteopathy—Somebody wrote to the New York Evening World signing the name "Ignorant," as follows:

"I wish readers who have had actual experience, good or bad, would tell briefly what they think of the medical science known as osteopathy. I personally know of several cases where it has wrought apparent miracles. But I know other people who say they don't believe much in it. These latter people, so far as I have been able to find out, have for the most part never tried it. So I ask experienced readers. A man told me osteopathy cured him of consumption. Another doubted this man's word, though I've always found the former man truthful. Will readers discuss?"

This brought two replies at least, which were published:

For the information of your correspondent signing "Ignorant," and asking about osteopathy: I was told by two physicians, four years ago, that I would not live more than five years—probably not more than three—and would never do another day's work. I am now well and doing as much work as I did thirty years ago, the result of osteopathic treatment. I can cite many cases of persons cured or helped by osteopathy, induced by me to try the science.

GEORGE M. JAQUES.

A reader asks about osteopathy. For a number of years I have been suffering with a disease of the spine, and after being treated by medical doctors and taking their medicines without relief, I was finally told there was no cure for me. For the past twelve months I have been treated by osteopathy with better results than I ever expected. I have gained in health, strength and weight and have every hope of scientific manipulation of the hands.

A. VOSBURGH.

DOC BING IN NEW ROLES.

Doc Bing an osteopath would be,
That he might cure more ills.
He packed his grip and started out
For Kirksville and the "Stills."
He studied hard, he learned it all,
He could be "shown" there,
He now treats ills without the pills,
Right in his office chair.
—"Moonshiner."

Doc Bing had on an awful grouch,
Was feelin' mighty mean,
He pried himself up from his couch
Jest so's to vent his spleen.
He criticised the A. O. A.—
Said 'lections weren't fair—
He told us then how he'd run things—
Jest from his office chair.

* * *

BIRTHS.

Born—To Dr. and Mrs. J. E. P. Holland, Bloomington, Ind., Nov. 10th, 1908, a son.

Born—To Drs. Phelps and Phelps, Maryville, Mo., Jan. 21st, a girl, Theodosia Charlene.

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Born—To Dr. and Mrs. T. C. Morris, Spokane, Wash., Dec. 17th, a daughter.

* * *

DEATHS.

Died—Dr. Frank L. Hughes, of Jackson, Tennessee, Dec. 28th. Dr. Hughes was a graduate of the Chicago school, '04, and of the P. & S., Memphis, '07. Shortly after graduation from Memphis, he contracted typhoid, and then tuberculosis, for the past three months knowing that he must die.

Died—Wife of Dr. A. E. Berry, of Tampa, Fla., Nov. 18th, after illness of over a year. Her sister, Dr. Nelle M. Shelle, was with her most of the time.

Died—At Kirksville, Mo., Jan. 1st, '09, Geo. Pemberton, the father of Dr. Stanley D. Pemberton, of Brooklyn, N. Y.

* * *

MARRIAGES.

Married—In New York City, Dec. 23, '08, Alexander Francis McWilliams, of Boston, Mass., and Miss Elleanor Mary Batstone, of New York City. At home, Boston, Mass.

Married—At Holyoke, Colo., Dec. 23, '08, Dr. Laureston Rawston Livingston of Kansas City, Mo., and Dr. Susan Ina Patterson, of Holyoke. At home, 807 Forest Ave., Kansas City, Mo.

Married—At Souix City, Iowa, Dec. 19, '08, Dr. R. T. Quick, of the A. S. O., and Miss Alta M. Gilmour of Sioux City. At home at Kirksville, Mo.

Married—At Redlands, Calif., Jan. 6, '09, Dr. J. A. E. Reesor of Toronto, Can. and Miss Alice L. Shelly, of Redlands.

* * *

LOCATIONS AND REMOVALS.

Austin, Isabelle, from 15-16 to 3-4 Fletcher-Salmons Bldg., San Diego, Calif.

Balfe, Anna, from Gering, Nebr., to 505 Mason Bldg., Los Angeles, Calif.

Balfe, Eleanor, from Kansas City, Mo., to 505 Mason Bldg., Los Angeles, Calif.

Byers, Jeanette, has located care Hotel Manavista, Bradentown, Fla.

Cave, Francis & Edith Stobo, from 208 Huntington Ave., Boston, to 22 Cypress Place, Brookline, Mass.

Collier & Collier, from 635 Second St., to Pope Bldg., 3rd and Walnut, Louisville, Ky.

DeSpain, J. E., from Lawton, Okla., to Hodgenville, Larne, Co., Ky.

Ecker, F. L. & Myrtle L., from Flora, Ill., to 1237 Jackson Blvd., Chicago, Ill.

Eddy, J. T., from 536 to 224 Broad St., Newark, N. J.

Efford, William, from St. Petersburg, to Live Oak, Fla.

Elliott, J. W., from Carson, Ia., to Creighton, Nebr.

Erwin, E. Paul & Minnie B., from Indianola, to Perry, Ia.

Freeman, A. E., from Cairo, to Cameron, Ill.

Galbreath, Anna, from 88 Broadway, to 112 Broadway, Paterson, N. J.

Frey, Julia V., address while abroad, 1707 Gilpin St., Denver, Colo.

Goodell, J. C., from Covina, to Escondido, Calif., in partnership with Dr. E. A. Plant.

Gorin, J. W., from Brunswick, to 247 Bull St., Savannah, Ga., in partnership with Dr. T. L. Davis.

Holme, T. L., from Balckow, Mo., to University Place, Lincoln, Nebr.

Ives, Gorden G., from Los Angeles, Calif., to 224 Reed Hotel, Ogden, Utah.

Knight, Delia G., from 315 W. 79th to 230 W. 99th St., New York City.

Layborn, Fannie B., from 401 E. 1st St., to 210-11 First Ave. Hotel, Denver, Colo.

Lawrence, J. Lovell, from 2124 Bush St., to 2077 Sutter St., San Francisco, Calif.

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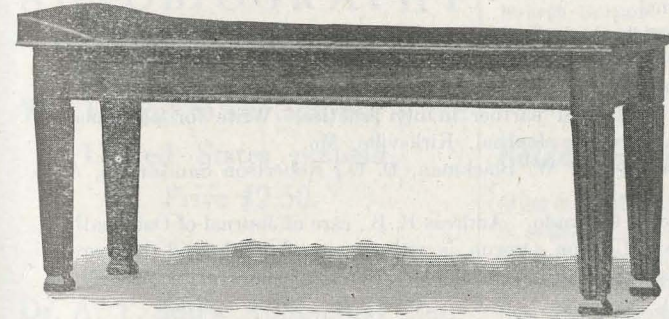
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Wanted—A good substantial partner in my practice. Write for particulars. Address, "Northwest," care the Journal, Kirksville, Mo.

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Location—Beardstown, Ill., is without an osteopath. Patients are compelled to go to other towns for treatment. Rushville, near by, is also without a D. O. Both towns are good ones, and could be made a good field. Further information may be obtained by writing, Mrs. B. H. Griffin, 917 Jefferson St., Beardstown, Ill.

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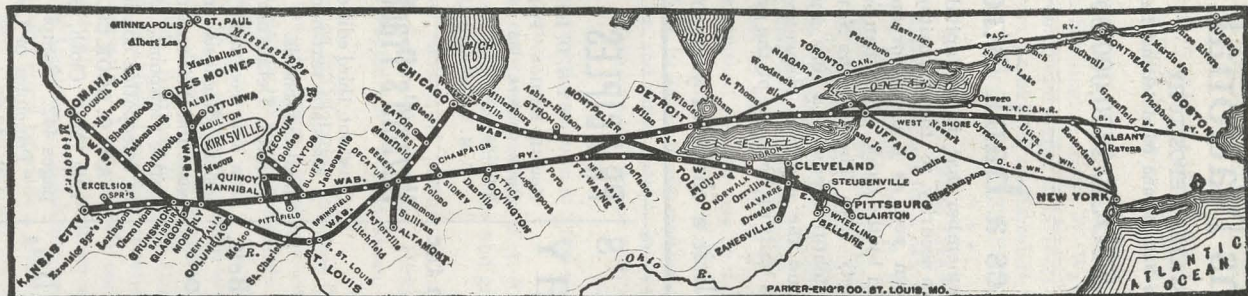
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