

# **The Journal of Osteopathy**

**April 1902**

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THE



# JOURNAL OF OSTEOPATHY

KIRKSVILLE, MISSOURI, APRIL, 1902.

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## AN ATTRACTIVE FIELD.

CHARLES HAZZARD, PH. B., D. O.

Among the multitude of men and women who annually are turning toward osteopathy as a new and promising profession, there are, as yet, probably not many who are taking it up because they see in its unsolved problems something to challenge their mental strength. As class after class is graduated, and gives place in the school for new-comers, we find among us a body of men and women upon whom we are proud to look. We find among them men who have left lucrative, even high salaried, positions to assume the somewhat humble role of a student of osteopathy. There are various reasons why this is so. Some, even though holding good positions, see in the lines of work they are following little or no promise for the future. Others come in because they are following a natural bent in their nature toward a professional life, having at last found that long-looked-for opportunity of entering upon a career most congenial to them here presenting itself. Others drop the business which has engaged their activities for many years to study because osteopathy has saved some loved one from serious illness or death. This, we are glad to say, is a large class among us. The result-producing proclivities of osteopathy are to be thanked for attracting to the profession a multitude of the men and women who are today its ablest representatives. For whatever reason our students have come to us, we are glad to count them among our number, feeling that they, with us, represent one of the greatest professions in the world. We, of the present day osteopaths, are united with a peculiar bond of brotherhood, for we are the few, perhaps the chosen few, who, in this epoch-making period of a great science, are laboring to formulate the principles of a new body of knowledge, destined to confer great blessings of health upon the human race. Our names will, no doubt go down in history as the early workers with a great science which is destined, at a future day, to be for the healing of all nations. We of today are no doubt the actors of parts whose significance we are but illy prepared to estimate.

Small wonder it is, and on discredit, that perhaps the majority of those in osteopathy to day have been attracted to it because they saw in it a result-compelling, and therefore a lucrative profession. But it is a matter of congratulation to the profession that the spirit that clearly dominates it is not a sordid

one. The papers and the discussions at the national conventions; the character of the literature of osteopathy, as represented in the various scientific and popular publications; and above all, the character of the men and women representing the profession, all are indicative of the highest purposes and the noblest aims.

We number among us many an acute intellect, whose appetite for acquirement is whetted by the fact that we are pioneering upon the field of knowledge in osteopathy. There is a type of man who glories to find himself in a tight place, for the joy and exhilaration of figuring his way out. So there is a type of intellect that rejoices to face the unknown, and to solve the mysteries of a knowledge new to man. This is the type of man we are looking for to become a student of osteopathy. We are glad that he is not altogether lacking among us now, but we want more of him. He refuses to be satisfied by a glib twist of the tongue in explanation of some mighty truth in osteopathy or to sit in indolent ease complacently contemplating the great unknown before him. All hail to the man with a set of brains of the quality to settle down to the most painstaking and laborious investigation of the facts of the science, and to the minute elaboration of each precious detail of knowledge in the diadem of osteopathy. We need the German type of intellect, which is satisfied to spend a life time of study and investigation upon a single small point, satisfied if only it may succeed in adding one jot to the sum-total of absolute and accurately determined knowledge. That mad rush for a diploma and to be off to make a fortune is folly.

What is absolutely known in osteopathy today is but as a grain of sand upon a shining sea shore. We do many things, get many results, cure many sick, and save many lives; but just how we do it, and why we get certain results, and just how we should work to get them in all cases, yet remains, in a great measure, to be explained.

There is no truer saying than that osteopathy is in its infancy. We need a few hundred men of the stripe and size to measure up to the opportunities found in studying out the hidden things in osteopathy. Happily, we feel as sure that these men will arise as we are certain of the chip-on-the-shoulder trait of human nature.

## INTEMPERANCE IN EATING VS. ECONOMIC FEEDING.

PAUL M. PECK, D. O., SAN ANTONIO, TEXAS.

Temperance implies the control of the appetite. When one has accomplished that, he should be safe to eat or drink what he pleases if his good judgment may be trusted. With wisdom and judgment in control, there is nothing more exhilarating than a keen appetite.

Much that is said concerning temperance loses its force when the one to whom the remarks are addressed sees the lecturer paying the penalty of bodily ills from overeating. Thousands of the most ardent temperance workers are

as much dependent on their coffee as the regular toper is on his morning "toddy." Each declares his dependence upon the morning stimulant. Ask the one to stop overeating, or the other to give up the morning draught of coffee and you have insulted or forced an admission of dependence or an inability to desist. Intemperance in eating is about as common as intemperance in drink, yet few realize it.

That the average person eats more food and drinks less water than his system requires, is a fact recognized by most physicians but ignored by most eaters. We forget that nutrition is more dependent upon thorough digestion and assimilation than upon the quantity of food digested. A small portion well digested will accomplish more than a large portion less thoroughly disposed of. Nature is economical in all her transactions. She never approves of so crowding alimentation that portions of food will pass through a healthy tract and be excreted almost unchanged. The analytical laboratory has shown that this is what a large majority of overeaters are doing. It is not surprising that so many are complaining of anorexia, poor digestion, drowsiness and ill health. Consideration of this condition and a study of diet as an adjunct to osteopathic treatment in connection with stomach and bowel complaints has made us an advocate of "economic feeding." Personally, we decline breakfast entirely, eat a light lunch and dine heartily at six o'clock. Such has been our custom for two years or more, and we find it has so much to recommend it that we write this paper.

If instead of sitting around waiting for breakfast the brain worker accustoms himself to do without that meal, he will soon be delighted to note with what avidity he goes to his morning's task. The energy usually consumed in digesting the meal is left for the brain, and the blood is not diverted to the stomach, surely a physiological reason for the recognized fact that morning is the best time for study. When, after a rest, the waste matter is carried off, the broken down cells have been repaired and the clogged avenues of thought have been opened and flushed with living blood, and when this condition exists throughout the body, the perfect machine should need but the stimulation of the awakening bath to put it into activity. What need should there be for the morning meal?

Nature seems to have planned for a physiological rest for all the organs of the body, but under the present three meal system it is a question whether the digestive tract, or at least portions of it, ever gets a rest unless by some accident or revolt of the appetite. The tale of the stomach would be a weary one, I fear. Often after an entire night's work, the stomach, that long suffering and much abused servant, has been unable to dispose of the contributions of the night before, the breakfast hour forces a renewal of the same attempt. Consultation of the tables giving the time for gastric digestion of the various articles of diet will show little or no time is left between meals for rest. And yet, intestinal digestion must continue often for hours after the main organ has disposed of its contents. It is to insure this certainty of a physiological

rest and to prolong it as far as possible at one time that we prefer eating the two meals closer together.

Many argue that they would be unfitted for work by the long fast, occasioning a feeling of faintness. One should not depart from a custom so radically different from the habit of a lifetime and of all preceding generations without gradually accustoming the system to the new order of things. Decrease the meal gradually until it is limited to a cup or more of cool water. Repeat this meal several times in the morning, at least every time the faintness or "gnawing" sensation called hunger begins to appear. The drink will usually relieve both. After a very short time one will not think of breakfast nor of being faint. After all, the feeling we are accustomed to call hunger, coming thrice daily, is simply a nervous rhythm established by the custom of centuries preceding. Dr. Still's "Indian" we have often learned lessons from made a point when he laughed at the white man for "eating by the clock" instead of eating when he needed food, for that just about expresses the present state of affairs when people so often draw to the table without the slightest feeling of hunger. After passing the regular meal time an hour or so, one usually loses that acute desire for food and easily awaits the next meal. This proves the feeling is not real hunger, that is the need of the system for sustaining food, but it is a nervous deception which has led us to believe that we must answer that call by putting food into the gastric cavity every time it is manifest. Man should absolve himself from this hallucination and learn to master his appetite, to eat scientifically and judiciously, to have the thought in mind when eating it is done for the bodily good, and to enjoy every mouthful and anticipate the next with that same keen relish, and lastly, to stop eating when a reasonable amount has been ingested, even if the desire is still present to take more, as it will be if the appetite is right. It will be forgotten as soon as the back is turned on the table, and will be preserved as a relish for the next meal. This all requires the exercise of will power, but so does everything worth having; but the man who is master of his own appetite may expect to master others, beside enjoying the rich heritage that comes through careful living, nature's greatest gift. We hear much stress laid upon regularity of meals, but I have seen several cases of gastric disturbances relieved by upsetting that regularity and thus stimulating the digestive glands to an unusual activity through changing the hours they were called on to do duty—"getting out of the rut" or rhythm we have referred to above.

To summarize then, the reasons for the two meal plan, we would favor because:

It tends to overcome the habit of overeating.

It gives the stomach a long physiological rest.

By allowing its walls to contract during rest it induces moderate eating and helps to cure dilatation.

It encourages the drinking of water in copious quantities and thus stimulates secretions of all glands and especially the liver, thereby flushing the

bowels with Nature's antiseptic and guarding against typhoid and malaria.

What is more important, it renders the bowels very susceptible to the stimulation of the fecal matter within and thus prevents constipation.

It accomplishes a more active exchange of the tissues proteid and thus accomplishes better oxidation in the tissues. If there is a pathological fermentation in the tissues such as to produce eruptions of the skin, as we are told, the diet we are advocating seems to prevent that. I have noticed several cases of pimples and blackheads disappear entirely or greatly improve through adoption of the two meal plan. We have reports of the cure of fibroid tumors, dyspepsia and several other ailments through the simple process of fasting.

The man of two meals is blessed with a keen appetite. It is believed that food eaten with a keen relish will accomplish more than when the appetite is lacking.

We have found the above plan, sometimes modified to suit the individual case, to be a great aid in relieving stubborn cases of stomach trouble. Many have protested that they could not stand the long fast, but I have never seen one who could not after determining to try the plan. I know of many who have become strong advocates of the plan after trying it and noting good results. If the plan seems too radical, do not condemn without a trial.

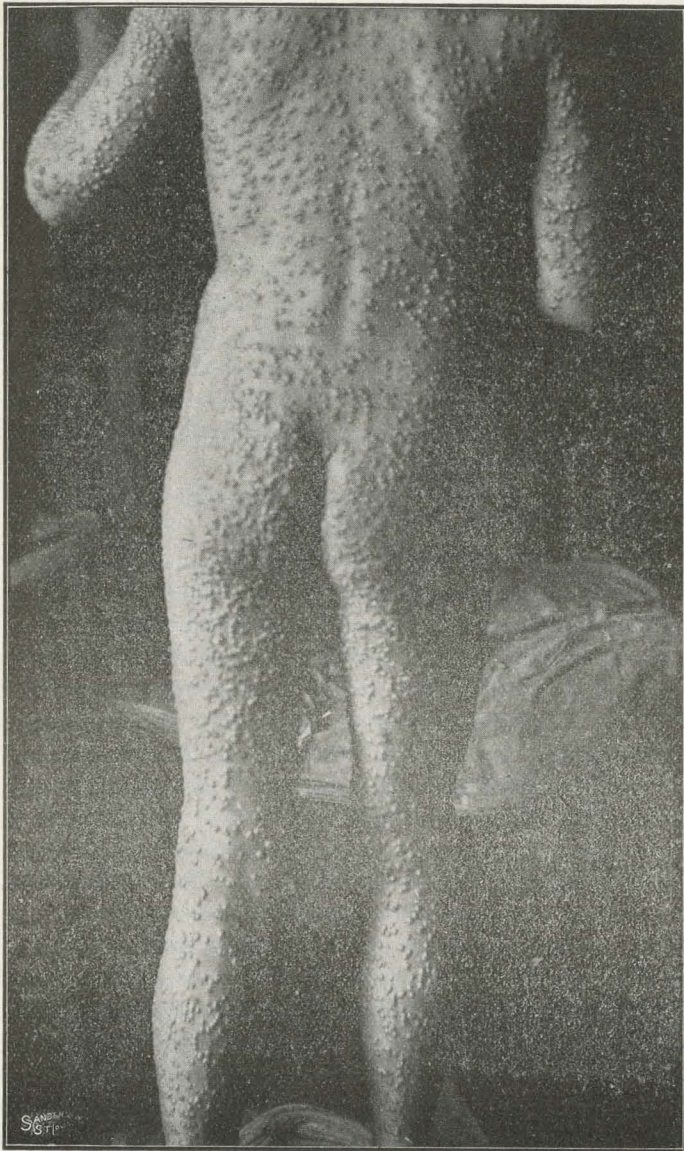
## TREATMENT OF SMALLPOX.

F. P. YOUNG, B. S., M. D.

Smallpox is as old as history, perhaps older. The oldest Sanskrit writings tell of its ravages. A Chinese treatise describes smallpox as having appeared in the Tsche-u Dynasty, perhaps a thousand years B. C. The native foci of the disease perhaps may be found in India and the countries of Central Africa, from whence, by successive importations, it has diffused over the habitable globe. It has destroyed more lives than cholera, yellow fever or the plague. Practically nothing is known of the morbid poison, its nature or its peculiarities. The best energies of master minds have been expended in vain in endeavoring to determine the cause of this dread disease, also methods of destroying its poison. Nothing definite has resulted. It is believed that the morbid agent is a micro-organism since the clinical course of the affection is similar to that of other acute infectious and contagious diseases, and that this virus is capable of propagation in the human body; also that it lives under almost any circumstances or conditions outside the body. We do not know how it gets into the body, whether through the air, by the skin or the alimentary tract by means of food and water. Not knowing the cause of the disease, it is only reasonable to assume that we have no means of destroying the poison. The truth is, when the poison of any acute infectious disease enters the body, we cannot destroy it. This may be done in a test-tube in a chemical laboratory, but not in the human body.

Since the days of the ancient alchemist, when marvelous powers were

ascribed to concoctions, we have had cure after cure advocated for various diseases. The cures for smallpox alone would fill a good sized volume, and their victims, were they all collected, would fill an immense cemetery. It has required centuries and doubtless the lives of many good persons to teach us that



Typical case of smallpox in the pustular stage. Photo taken by Dr. Young. Many who are not well informed on the subject will doubt whether the osteopathic physician can do anything to relieve the disease. Late experience shows that osteopathic methods are as good, if not superior to any other method of treatment. The osteopath best utilizes the physiological forces in the combatment of disease. This he ac-

complishes by means of manipulation. Then, if it is true, (which certainly is) that the disease will run its course—and if the poison is destroyed in the body or expelled from it, that these physiological forces alone can accomplish this—osteopathic methods would seem to fulfill all requirements.

The treatment may be best considered in two phases; first, the preventative which will not be discussed in this article; and secondly, the management of the case when once developed. Inasmuch as we have no method of destroying the poison in the body, all that can be done is to relieve the symptoms as they arise, and by means of disinfection and isolation of the disease. The chill, fever, muscular pains, etc., at the outset of the disease may be treated by the ordinary means used in such conditions. After the eruption appears, when the diagnosis can be made, the case should at once be isolated. The room in which the patient is quartered should be devoid of all furniture except as is absolutely necessary. Curtains, pictures, carpets, etc., should be removed. The remaining occupants of the house should be kept under observation for twelve days, when, after disinfecting the clothing, they may live elsewhere if they choose until the case is removed from quarantine. The knives, forks, dishes, etc., which go into the room of the patient, should be immersed in a solution of three ounces of carbolic acid to one gallon of hot water before leaving the sick room. All washable clothing, bed linens, etc., should be immersed in a similar solution and allowed to remain several hours, when then may be boiled and washed in the usual manner. The patient should be placed on a highly nutritious diet, likewise easily digestible. The secretions must be kept active at all times. The room must be kept comfortably warm, but well ventilated. The bed linen must be frequently changed.

In the pustular stage, which develops about the 8th day, there appears the secondary fever. This fever may be relieved by treatment or by baths. Antiseptic baths should be given daily. A solution of one part bichloride of mercury to five thousand parts of water is suitable. If the pustules are broken the body should be sponged over with warm water to remove any of the sublimate clinging to the skin. As the drying of the pustules continues, these antiseptic baths must be kept up not only to aid desquamation but to destroy the poison of the disease. When the pustules are large and are confluent, it is best to open and drain them well, especially on the face, as this will prevent pitting.

It must be kept in mind at all times that in spite of all that can be done, the disease will run its course. In mild cases, nothing may be required. In fact, some epidemics are so mild that it is quite impossible to keep the patient within doors. In such instances it is liable to spread rapidly. In severe cases, strong supportive measures are required. The fever must be relieved and the various other symptoms as they present themselves. After the patient has recovered, all the washable clothing should be boiled in an antiseptic solution of one to five thousand bichloride of mercury or one to fifty carbolic acid. The room occupied by the patient may be disinfected by means of formalde-

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hyd, mercury or sulphur. If formaldehyd is used, the gas should be generated in formo chloral in an approved generator of known capacity. To spray the walls well with a 2 per cent. solution will do some good, but gives us no assurance that our methods are not defective. If the gas is generated in the room it should be kept in the room from twelve to fifteen hours. The room should be tightly closed. Not enough of the gas can be generated by volatilizing the solution of the gas to be effective. The method popularly in vogue now is bad. The woodwork, floors, etc., may be washed by a one to two thousand solution of corrosive sublimate. Another quite effective means of disinfection may be employed, and has the advantage of simplicity. The apparatus necessary is a frame of a chafing dish, a china plate or a porcelain dish and an alcohol lamp. About two ounces of the corrosive sublimate is placed upon the plate and the alcohol lamp lighted and placed under it. This will volatilize the mercury. After four hours a person having a wet cloth over the face may enter the room and raise windows, allowing the room to air well. After ten or twelve hours a pound of sulphur may be burned in the apartment to render inert any mercury clinging to the furniture. After this the wood-work and floor may be washed with an antiseptic solution. Bed clothing that cannot be disinfected must be burned. In mild cases desquamation will be complete in thirty days; in severe cases perhaps forty days will elapse. In all cases isolation should be maintained until desquamation is complete and disinfection thoroughly accomplished.

In visiting the patient afflicted with smallpox it is necessary for the physician to use the utmost precaution against carrying the poison, hence acting as a common carrier of the disease. An antiseptic suit costing a few dollars may be used and it assures the best protection. If this is not used the outer clothing must be changed in an out building on returning from a case of smallpox. The clothing may be moistened with a ten per cent solution of formalin. This suit so removed each day may be worn in visiting the case in question. The hands, face and hair may be mopped off with a mercurial solution 1:4000, made by dropping one of the small white antiseptic bichloride tablets in a pint of water. It must be kept in mind that the poison of smallpox is heavy and very resistant and may live in clothing for a long time.

#### Married.

Married.—Miss Eva May Douglass, of June, 1901 class, A. S. O., to Wm. McConnell of Emporia, Kansas, on March 19, 1902.

Married.—Dr. William W. Brock, of the June, 1898 class, A. S. O., to Miss Clara Carpenter, both of Montpelier, Vt., on March 31, 1902.

#### Nervousness and Insomnia.

Mr. ———, age fifty one, with history of several years standing of nervousness and insomnia. Physical examination revealed an anterior condition of 2nd, 3rd and 4th cervical vertebrae, also lesion at 5th and 6th dorsal vertebrae. Treatment applied was the correcting of lesions and spinal treatment. Six weeks treatment improved the case wonderfully.

Reported by E. M. Cramb, Tecumseh and Humbolt, Neb.

## The Journal of Osteopathy.

PUBLISHED MONTHLY UNDER THE AUSPICES

OF THE

AMERICAN SCHOOL OF OSTEOPATHY.

KIRKSVILLE, MISSOURI.

Subscription, - 50cts per year in advance.

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### CONTENTS—April, 1902.

GRADUATES OF THE A. S. O.....	I to XVI
AN ATTRACTIVE FIELD, Chas. Hazzard, D. O.....	129
INTEMPERANCE IN EATING VS. ECONOMIC FEEDING, Paul M. Peck, D. O.....	131
TREATMENT OF SMALLPOX, F. P. Young, C. S., M. D.....	133
EDITORIALS, PERSONALS, ETC.	

#### Editorials.

THE attention of graduates of the A. S. O. is called to the advertisement of I. L. Sherman of Ashtabula, Ohio, in this issue of the JOURNAL. It occurs to us that his proposition may be a good thing for some practitioners.

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OUT in Kansas a medical doctor cannot practice osteopathy without first procuring a license from the state medical board for that purpose. This action of the board will prevent those medical doctors from advertising and practicing as osteopaths who are not qualified in the science but who use the name to "draw trade." The ruling of this board is a step in the right direction as a medical doctor is in no way qualified to practice osteopathy unless he has taken a course of instruction in this method of healing. Under the law only graduates of regular schools of osteopathy can procure licenses from the board for the purpose of practicing osteopathy.

DURING the past year a large number of the graduates of the A. S. O. have returned to Kirksville to visit their alma mater and they have without exception expressed the opinion that the school is doing better work than ever before, and furthermore that they are gratified to note this steady advancement in the school work of the institution from which they are graduates. Our old graduates always take advantage of their privilege to visit the lectures and it is not an uncommon occurrence to hear them remark, "the students now in school are getting that work better than we did." As a result from time to time a number of our former graduates return to the A. S. O. for post-graduate work. It takes time to develop a thorough school. It is a poor institution that will not do better work each year. As our school grows older our methods of instructions are better, our system of management is better, our professors become better qualified in their special lines of work.

#### Sioux Valley Osteopathic Association.

The Sioux Valley osteopathic association will meet in Sioux City, Ia., Thursday, April 3rd at the office of Dr. F. G. Cluett. Morning and afternoon sessions will be held at which members of the association will read and discuss various papers of interest. Dr. Cluett will entertain the members at dinner after which a trip will be made to Riverside Park and other points of interest.

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#### Montana Osteopathic Board Reorganizes.

The Montana State Osteopathic Board met in regular session at Helena, March 4-5 at which time the board elected the following officers for the new year: president, Dr. Asa M. Willard, Dillon; secretary, Dr. Chas. W. Mahaffay, Helena; treasurer, Dr. Orson B. Prickett, Billings. The regular examination was conducted at this meeting at which there were a number of applicants. The list of questions furnished the JOURNAL indicates that these examinations are thoroughly but fairly conducted. The next meeting of the board will be held in September.

**Montana Association of Osteopaths Meet.**

The annual meeting of the Montana Osteopathic association was held in the parlors of the Grandon Hotel in Helena, Montana, March 3rd, 1902, business of importance occupying the whole day.

The society has now about twenty members.

In the absence of Dr. T. J. Sheehan, president of the association, the meeting was called to order by Dr. J. C. Burton, vice-president.

The committee appointed at the previous meeting to draft a constitution and by-laws presented the draft and after discussion and consideration it was adopted. The following officers were elected for the ensuing year: Dr. J. C. Burton, president; Dr. Ina F. Browne, vice-president; Dr. C. W. Mahaffay, secretary; Dr. E. V. Strong, treasurer; Dr. Asa M. Willard, Dr. O. B. Prickett, Dr. E. V. Strong, trustees.

The following resolutions were adopted: Whereas, it has pleased the Omnipotent One to take from our midst our beloved fellow-practitioner, associate and friend, Dr. Lulu B. Hamilton.

Resolved, That we as members of the M. O. A. because of her professional worth, her social and lovable qualities and her value as a friend, deeply mourn her untimely death and sincerely sympathize with her bereaved parents, relatives and friends.

Resolved, That a copy of these resolutions be spread upon the minutes of the association, sent to the bereaved family and published in the JOURNAL OF OSTEOPATHY, the Kirksville, Mo and Cody, Wyoming papers.

DR. ASA M. WILLARD,  
DR. INA F. BROWNE,  
Committee.

The following resolution relative to the extension of time of study in the osteopathic colleges was adopted:

Resolved, That as an association we advocate and urge the extension of the course of study in the associated colleges of osteopathy from the present twenty months' course to a period including at least twenty-seven months of study.

Meeting was then adjourned to meet in September, 1902, as provided for in constitution.

DR. INA F. BROWNE,  
Secretary.

**Osteopathic Victory in Virginia.**

Recently a bill was introduced in the senate of Virginia requiring that all persons who professed to cure disease by any method whatsoever, whether medicines were used or not, and whether surgery were practiced, should first stand an examination before the State Board of Medical Examiners.

The real object of the bill was to prevent osteopaths from practicing in that state. The committee to which the bill was referred decided, by a vote of 7 to 1 to report the bill with the recommendation that it do not pass. Several of the committee, including Chairman Barksdale, expressed themselves as bitterly opposed to the measure.

Dr. R. S. Martin, of Stuart, secretary of the State Board of Medical Examiners, managed the case for the physicians, assisted by Mr. Harvey, the patron of the bill, and ex-Governor O'Ferrall was the attorney for the osteopaths, of whom there were several present.

Dr. Martin spoke in favor of the bill, and was followed by Dr. George Ben Johnston, Dr. Stuart McGuire, Dr. Hugh Taylor, Dr. Edward McGuire, Dr. J. N. Upshur, all of this city, and Dr. C. A. Nash, of Norfolk. These gentlemen spoke forcefully for the bill, which, in their opinion, was needed for the better guarantee of the people of the State against being imposed upon by quackery.

**A "LIVE WIRE."**

The first speaker introduced by Governor O'Ferrall, for the other side, was Dr. Patterson, an osteopathic doctor of Washington, who, as one of the committee remarked, was a perfect "live wire." It is said that the Doctor has made a reputation in the Federal city as a healer of diseases, and it was evident to the committee and the crowd of spectators who heard him yesterday that he has abilities which would enable him to shine on the platform. He spoke at length, was asked many questions by the physicians, and always responded in a manner which made the audience laugh. He was before the committee for some time, and it was clear from the remarks which passed among the members of the committee that his

speech made a very deep impression against the bill.

He is a quiet, pleasant looking gentleman, who, at first glance, appeared to the doctors present to be "easy." After a little they learned better. He made a statement of the claims of his science, which was conservative and modest. He had supposed that the presentation of the subject by the other side would be more in keeping with the spirit of the times. He told of the school at Kirksville, Mo., the parent institution, with its thorough course of two years, or twenty months. There were fifteen other schools and osteopathy is recognized and licensed in seventeen States. Allopaths don't understand what osteopathic treatment is. That is all. The thorough instruction given osteopaths in anatomy and kindred subjects and their fitness to act as accomplished diagnosticians was dwelt upon. Osteopathy does not claim to be a cure-all. And osteopaths are willing to stand a thorough examination on their science. It is young. It merely asks to be allowed to live and prove its value and usefulness.

**WHERE ALLOPATHS FAIL.**

Dr. Upshur inquired what cases osteopaths treat.

"Diseases in which allopaths fail," required Dr. Patterson.

What would you do with valvular disease of the heart? inquired Dr. Upshur.

"About as much as an allopath would, and that isn't very much, you know," replied Dr. Patterson.

And the ladies applauded.

In reply to further questions Dr. Patterson showed that he knew the what, where, how, when and why of valvular diseases of the heart, and told how it would be treated from an osteopathic point of view. The allopaths failed to catch him napping here, or in tuberculosis, appendicitis and diphtheria, and Chairman Barksdale cut the colloquy short with: "No matter how ignorant both of you may be, the committee could not tell which would be which."

Dr. Edward McGuire wanted to know of Dr. Patterson the symptoms of a child's death from diphtheria. Dr. Patterson replied that he could not answer, as none of

the diphtheria child patients he had attended had died.

And the ladies applauded.

Governor O'Ferrall closed the argument for the osteopaths and the committee decided for them by a vote of 7 to 1.

The osteopaths will introduce a bill regulating their practice and giving them a separate board.—Richmond Daily.

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**The Practice of Osteopathy Legalized and Regulated in Ohio by Legislative Enactment, After a Struggle With the State Medical Board and Medical Physicians, Covering a Period of Five Years.**

Most of the readers of the JOURNAL are familiar with the ups and downs of the Ohio osteopaths with reference to their relation to the law.

The account of the prosecution of Drs. Eastman and Gravett and the act of the Supreme Court declaring the Love Medical Law invalid will be readily recalled. The following letter from Dr. M. F. Hulett of Columbus, explains the present situation:

COLUMBUS, OHIO, March 20, 1902.

DEAR DOCTOR:—The legislative contest is practically over. All opposition is withdrawn, so that we are assured of recognition. The House Judiciary Committee has unanimously recommended our substitute bill. It will probably be up for vote in the House next week, and in another week or two the Senate can act.

So long as there was a hope of our original plan of creating an independent board, as outlined at our last annual meeting, carrying, our committee worked to that end. About one week ago it became apparent that this could not be done. Rather than let the matter drop, we proposed a substitute, after consultation with a large number of the leading osteopaths of the state, embodying the essential features of our original bill, as follows:

Preliminary educational requirements same as Love Law.

Graduate osteopaths now practicing in the state, upon recommendation of the Osteopathic Committee, will receive certificates without examination, if application is made

within thirty days after the passage of this act. \$5.00 fee to State Board.

In the future all applicants must pass examination before State Medical Board in anatomy, physiology, physical diagnosis, obstetrics, and before a committee of three osteopaths in pathology, physiological chemistry, gynecology, minor surgery, osteopathic diagnosis and principles and practice of osteopathy. Fee \$25.00. This Committee will be appointed by the State Medical Board upon recommendation of the Ohio Osteopathic Society.

Graduates of reputable schools of osteopathy who have been in practice in any other state for five years or more, may be issued certificates without examination. Fee \$50.00.

All certificates issued must be filed with probate judge. Fee \$1.00.

Administration of drugs and surgery are denied to osteopaths.

This substitute will give us a good law, satisfactory to our opponents as well as to our friends in the legislature, and we believe in the end will work to the advantage of our profession.

This work has been accomplished by a long siege of close application to business and at considerable expense. It has resulted in elevating osteopathy to a dignified position in the eyes of the law, and every osteopath in the state will reap the benefit. Dr. Hildreth has been untiring in his efforts to do the best possible for the Ohio osteopaths, and the profession generally.

All osteopaths not members of the Ohio Osteopathic Society are urged to make application to the secretary for membership. The Executive Committee will probably have a meeting in a few weeks, at which time applications will be considered.

Fraternally yours,

M. F. HULETT, D. O.,

Secretary Ohio Osteopathic Ass'n.

Later. House passed substitute bill by a vote of 78 to 0.

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#### The Toronto Convention.

The Fourth International Convention of the Student Volunteer Movement for Foreign Missions was held in Toronto, Ontario, Feb. 26th to March 2nd, 1902.

These Student Volunteer Conventions are held once in four years and are intended to diffuse interest in the avowed purpose of the movement, "The Evangelization of the World in this Generation," and to spread information in regard to the really wonderful progress already made toward the accomplishment of that stupendous task.

At this convention, were assembled over two thousand students and professors from over four hundred institutions of higher learning in the United States and Canada. Of this number one hundred and fifty were from medical schools. The American School of Osteopathy was represented by Miss Radford, general secretary of the Young Woman's Christian association and by Dr. F. J. Fassett of the faculty. Among those present at the convention were representatives of all the larger denominational Mission Boards in whose hands is the real authority to commission men and guarantee their support and remuneration in foreign countries. The representatives of the American School of Osteopathy found opportunity to interview some of these officials in regard to their policy in case a graduate of a school of osteopathy should offer his services as a medical missionary. None of the boards consulted have ever received such an application and consequently none of them have framed any specific policy in the matter. The general opinion was that the only consideration which would deter them from commissioning such a volunteer, if well qualified in other respects, would be the fear of causing interruption of the harmony that is so essential among all workers in mission lands.

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#### A Word for Osteopathy.

If you will permit me, I should like to say a word for osteopathy.

One is not a little surprised at the strange and varied opinions given by many persons, who seem in other ways well informed, of their ideas of this new science. It is astonishing too, even among people of thought, that they will express themselves sneeringly and disparagingly of that which they know nothing, and so influence others who do not think or inquire

for themselves. It seems to be the general idea of mankind that if one is ill he must take some medicine, and because a custom is old, it must therefore be right and best.

And so any new theory or science that does not advocate drugs and dosing, according to the already prescribed and established pathies, is trash and fake to him.

If one believes that in nature there is perfect harmony and law and order, why not in man—nature's highest product? If then we violate nature's laws and become ill, why is not a science which will assist nature in natural ways and then let nature cure, a safer and wiser practice, than taking into our system ounces of drugs and poisons for the treatment of symptoms and overlooking the *one* just cause of illness—something out of order with the mechanical construction? People are going to be treated by the pathy which helps them most and which emancipates them from dosing and the knife, if possible. Osteopathy can and does do this. It fails when nature has been so interfered with and maltreated or when the patient has no reserve strength or recuperative powers.

I know that of which I speak, having tried allopathy, homeopathy and osteopathy, and have decided after a year's experience on the side of the latter.

It has been a long and suffering journey to find relief, but through the darkness has come the light and osteopathy and health.

LAURA CURIE,  
New York City.

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#### The Old Doctor Made Honorary Member of Boston Club.

BOSTON, MASS., Feb. 25, 1902.

DR. A. T. STILL, Kirksville, Mo.

DEAR SIR:—We beg to announce that at a regular meeting of the "Spinal Column" of the Boston Institute of Osteopathy, you were unanimously elected to honorary membership of that club.

This club recently organized is composed of members of the senior class of the Boston Institute of Osteopathy who believe that bony lesions are the primary cause of disease.

The object of the club is to promote osteopathy, (in this school) from that standpoint.

Very truly yours,

R. E. BROWN, Sec'y.

By order of club.

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#### Dr. Asa M. Willard of Dillon, Montana Honored.

Governor Joseph K. Toole, honorary vice-president of the American tuberculosis convention to be held in New York, May 14-17, has appointed a number of Montana doctors as delegates from that state.

The object of the convention is to gather physicians from all parts of the United States for the purpose of an exchange of ideas as to the best method of battling with consumption, a disease which is spreading despite the advanced skill of physicians and medical discoveries.

Dr. Asa M. Willard, of Dillon, is among the number appointed by the governor. We are glad to note that osteopathic physicians, not only in Montana but elsewhere, are receiving recognition equal to that accorded the members of the older schools of practice. The JOURNAL congratulates Dr. Willard for this well merited recognition and feels that by his appointment he has not only been honored but the science of osteopathy respected.

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#### Oklahoma Osteopathic Association.

The osteopaths of Oklahoma met at Dr. Clara Mahaffy's office in Oklahoma City, March 3, 1902 and organized the Oklahoma Osteopathic association.

Those present were Mrs. Clara Mahaffy, D. O., Oklahoma City; Mrs. Neva Triplet, D. O., Enid; J. M. Rouse, D. O., Oklahoma City; Mrs. Lucy Rouse, D. O., Oklahoma City; Miss Laura Haden, D. O., Oklahoma City; Miss Cassie Hubbard, D. O., Blackwell; Miss A. W. Hannah, D. O., Shawnee; Miss Winifred Streeter, D. O., Oklahoma City; L. O. Wright, D. O., Chandler; Harvey A. Dever, D. O., Kingfisher.

Immediately after the house was called to order the following officers were elected to serve temporarily, Dr. Mahaffy, president, and Dr. Dever, secretary.

Permanent officers of the Oklahoma Osteopathic association are, Dr. Clara Mahaffy



of Oklahoma City, president; Dr. J. M. Rouse of Oklahoma City, vice-president; Dr. Harvey A. Dever of Kingfisher, secretary; Dr. Neva Triplett of Enid, treasurer.

The first business before the newly organized association was to find ourselves a suitable name and after some minor discussion the name of Oklahoma Osteopathic association was decided upon. After this the matter of osteopathic legislation was thoroughly discussed. Some favored active legislation in behalf of the osteopaths while others contended for defense against detrimental action if any should be taken. Dr. Clara Mahaffy's view as follows was accepted, that we make all necessary preparations for legislation and secure it if the opportunity presented itself favorably. Dr. Hildreth and others were suggested as select workers should we need assistance.

Other important propositions concerning the advancement of osteopathy in the territory were discussed. The society favored securing a competent speaker at our next meeting and carrying out an interesting programme. We hope to be able to do this that our worthy profession may become more popular.

The time and place of our next meeting was left subject to the call of the president and we adjourned feeling that we had taken important steps toward the advancement of our profession.

HARVEY A. DEVER, D. O.,  
Secretary.

#### Hay Fever.

Hay fever or autumnal catarrh, is an inflammation of the mucous membrane of the upper air passages, styled by some writers hay asthma or rose cold. At about this time of every year large numbers of people are preparing to leave the dusty cities and plains to find relief for their respiratory passages in the cool, dry and clear atmosphere of the lakes or mountains where they remain for weeks, or months, enjoying a degree of relief from this very annoying trouble.

I would like to say a few words in regard to the osteopathic philosophy of the cause and cure of hay fever. It is an acute catarrhal inflammation of the upper respira-

tory tract, the lining membranes of the air passage become diseased and are irritated by the pollen of certain plants. The disease occurs periodically every spring or autumn. Rose cold usually begins in May or June and lasts until the latter part of July or first of August. Autumnal catarrh begins the latter part of August and lasts until the first heavy frost.

Medical literature is not very instructive reading, so far as the cause and treatment of this disease is concerned.

That the lining membrane is in a diseased condition and is irritated by certain dusts, vapors, odors or by pollens of plants, is easily understood; but what we want to know is the real cause of the disease and how it can be removed.

The osteopathic physician claims it to be a disturbance of the blood supply to the mucous membrane, so we must consider the nerve supply as the blood supply is controlled by the nervous system. The small sympathetic nerve fibers that control the action or supply the lining membrane can be traced back to the spinal cord, and it is the course of the nerve from its origin to terminal that the osteopath takes into consideration. The spinal nerves along with part of the cranial nerves, the trifacial, facial, glossopharyngeal, pneumogastric, are distributed to the nose, eyes, mouth and face in general. From the point of union of the nerves we follow them down the spinal cord, and find them emerging from between the vertebra in the upper dorsal and cervical regions. The osteopathic physician in examining a person afflicted with hay fever looks for a particular anatomical derangement sufficient to cause impingement on these nerves. A lesion may occur in the upper dorsal or the cervical region; the upper ribs, clavicle, or the tissues or muscles may contract so as to affect the vasomotor and sensory innervation or blood supply to the upper respiratory tract. The relaxing of the muscles and correcting of the lesions frees up the blood supply, and by removing the cause the parts become healthy and the disease will not occur again. I believe that the majority of cases if taken in time can be cured. In view of these facts it seems incontrovertible that the specific

lesions found by the osteopath are the actual cause of the disease.

H. M. MAYER, D. O.,  
Emporia, Kansas.

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#### Liberty.

Liberty to all cannot exist where there is license to few. Our county is "Free America,"—a refuge for the oppressed of every nation under the sun. Here no man can say to his fellow, "Thus shalt thou"—and compel obedience; but through combination of circumstances it has come to pass that no nation can show, in some respects, a greater number of real abject slaves than this same free America. True they are not so in name; at the polls everywhere, care is taken that the ballot be secret; yet how many, think you, of the more menial working class, dare to have an opinion in politics, even if they cared to do so?

The independent thinkers are denominated "cranks," and for policy's sake are shunned and perhaps denounced, in public, by the very ones who hold the same opinions, but dare not express them, and are willing to encourage and abet the "cranks" privately.

What is true in these other things does not prove false in medicis. The powers that be have sent forth their dictum, and it is not even "Thus far shalt thou come"—but "Thou shalt not enter at all! The field is ours and the harvest shall be ours also." The condition, physically, of the American people, shows well the nature of that harvest. A well woman is an anomaly; a man without rheumatism, kidney trouble or gout is an exception. If one chances to live beyond the prescribed fourscore years, his picture is put in the daily papers with a biography and careful description of his habits, in order to give some legitimate reason for his having lived so long and still being in possession of his faculties, and even then we hear the remark on all sides "I hope I shall not live to be so old!" There are cases, but they are exceedingly rare, of those who have reached, and even passed their centennial; our own city (Minneapolis) can boast one such, and she did "boast" when Mrs. Roll celebrated her 101 birthday last year.

Of course we cannot know with absolute certainty just what the all-wise Creator intended when he made man in his own image. If we had planned the affair, we should hardly have deemed it worth such an infinite amount of time and pains—as is evident to any student of the mechanism of the human body—just for the sake of, say five, or fifteen, or yet fifty years of life.

We believe that man was originally intended to live until his physical machinery was worn out, when it would simply stop, instead of breaking down here and there in some weak spot, and thus being laid up for repairs fully half the time, and needing to be handled with care the other half.

People who have given the subject intelligent thought agree upon this; if a state of affairs that plainly ought to exist does not, somebody is to blame—there is a responsibility some one ought to shoulder. It may not be you nor I who are guilty, and yet if our sins are those of "omission" instead of "commission" can we consider ourselves entirely free from blame?

If an abnormal condition prevails, and those who were prime movers in the matter have passed beyond the reach of man—victims to their own folly or ignorance, in many cases—then if a reform is ever to be brought about, somebody has to inaugurate it, and a good many somebodies must put their shoulders to the wheel and push! It may not be possible to move it at the first or second, or even the tenth trial; and when it does start it may move only a little way, but patience, perseverance and knowledge will after a while set it turning and bring the under and right side uppermost, and everybody will remark how very easy it was and wonder why it was not done long ago.

A lady once asked me to define "sin," and I made answer according to my convictions, "Ignorance is the greatest sin in the world." It destroys or renders impossible our happiness here, and unless we begin to study and have learned some of the easier lessons, will effectually shut the gates of heaven against us hereafter.

To go back a little; the majority of the human race, male and female, are slaves to disease. Pain sets its danger signals thickly and illuminates them with a glowing red

light. What do we do? Why, we immediately go to work to extinguish, or if we fail in that, cover up the warning light, and keep right along on the same perilous track! A sharp twinge or a hard dull ache tells us that we have imposed upon that much-abused organ, the stomach. The pain becomes unbearable; our knowledge is not along medical lines so we send for a master of the craft and he "gives a hypodermic" to allay the present suffering and prescribes some internal remedy to deaden the sensibility to pain in the future; he may likewise recommend "dieting" and "rest." We do not blame him; he is living up to his light, and doing the best he can by following carefully in the footsteps of the Masters of his Science that have gone before him, and have left footprints not only upon "the sands of time" but all through our beautiful cemeteries.

If we attach blame at all it is when the learned one forbids us to use our own brain power, and builds a wall to keep out investigators who might possibly unearth something he has failed to discover. He does not recognize the fact that all truth cannot be in the possession of any one man or class of men; the field is too broad and long and deep for that.

Some students are turning their attention in one direction and some in another with beneficial results. Let us join the ranks of honest and unprejudiced investigators, and without the aid of colored or otherwise "doctored" glasses, seek to find—not something that proves our theory right,—but something that shall set us right provided we are in the wrong.

It is an almost universally conceded fact that very little progress has been made in the "practice of medicine" for several hundred years. Some one did most effectually chain the chariot wheels, else such would not be the case. But a few strong men began, not many years ago, to look into the matter and have used a part of their reasoning faculties on such problems as this. Why should one when full of the power of resistance inherent in good health, be careful to shun all poisonous substances—children being taught not to touch that weed and by no means to eat those berries, and the rat

and bedbug poison are plainly labeled and placed out of reach on the top shelf—all this care when replete with vital force, and when sickness comes to prepare and administer dose after dose of mixed poisons.

Considered apart from the wisdom conceded to the learned M. D., it looks rather contradictory, doesn't it? It is out of such free-thinkers that have been developed the "cranks" which have set a-turning the wheels of the mighty vehicle of osteopathy. The machine started hard, but many came to the rescue until it really is moving along quite smoothly and with little noise, except as now and then it strikes a stone the allopathic road-builders could not dislodge, or runs against and uproots a stump left by the eclectics. But if there chances to be too many obstructions placed in its path "with malice aforethought," we shall "turn to, all hands" and see that they are legally removed, for this wonderful machine has a peculiar running gear that once started, will not, and can not stop.

LUCY SHERMAN MITCHELL, D. O.,  
Minneapolis, Minn.

#### Junior Reception to Freshmen.

BY MISS ELVIRA TRACY.

The junior reception to the freshmen was given March 14, and the evening proving a perfect one, the two halls were tested to their full capacity. The freshmen were received by the trustees and faculty in the library from half past seven to half past eight. Here the school colors had been used in the decorations, with the lights softly shaded in red. North hall was reserved for seating the faculty, trustees and freshmen, and Memorial hall for the other guests. The orange and black of the new class had transformed Memorial hall. The lights had tulip shades in varying tints of orange, while bunting in the two colors was tastefully draped, following the architectural lines of the room. The northwest corner was a bower of beauty, a booth of black lattice work twined with flowers of the orange, making a unique and dainty effect in the color scheme. In North hall the apple blossom combination of the entertaining class prevailed, used with the

abundance the dainty pink, green and white warranted. The music came from an alcove of these colors, and two elaborate booths showed them in effective ways. The lights had the tulip shades again, but this time in pink and green. The stage itself was an exquisite drawing-room, hung in the white in soft folds with festoons of the pink and green. Later in the evening it proved an attractive resting place for the guests. The programmes for the evening had pink lettering and were tied with green.

By nine o'clock the audience was seated, listening to the A. S. O. orchestra. Mr. Fred Coon, as junior president, welcomed the new class in hearty fashion, and its president, Mr. W. B. Ervin, despite his care not to exceed the modesty becoming a freshman, made us know this class had the right spirit. Naturally after him came the class yell:

A. S. O. A. S. O.  
Study the bones from head to toe.  
Still there's more. Hear us roar.  
February, February, nineteen four.

It was given with vim, and the orchestra came "Like a poultice to heal the wounds of sound." The soothing syrup song of the senior quartette, Messrs. Carlisle, Martin, Reese and Link, was enthusiastically received. When asked what passes through the foramen of Winslow it has been customary to answer "nothing," but the junior wag now says, "soothing syrup." The quartette kindly responded to an encore. The audience then listened with pleasure to a recitation by Mrs. Ernest White.

The second half of the program was the farce, "A Bunch of Roses," given by the following juniors:

CAST.

Mr. Petlove.....Fred F. Coon  
Mrs. Petlove.....Miss Neal  
Hopson, a butler.....A. S. Wiley  
Higgs, a maid.....Miss Stanley  
Herbert Mason.....A. M. Herman  
George Hargrove.....M. E. Pierson  
Miss Pilkington.....Mrs. White  
Miss Hilda Greaves.....Miss Abbott  
The motif of a situation that nobody

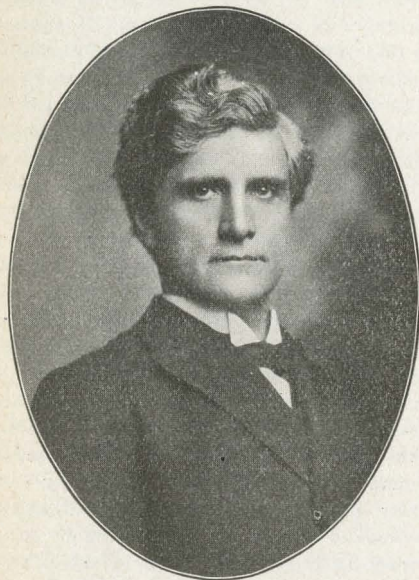
understands but the audience was cleverly worked out with the note written by the inimitable Hopson to the "Beloved of My Affections"—Higgs. It was found by Hilda, the pretty girl in the house party, and rediscovered by Herbert Mason, a flawless specimen of the summer man. It was cast by fate at the very feet of Miss Pilkington, coming at last to the hands of the somewhat deaf and very much jealous husband of Mrs. Petlove. If each had really eloped with what he claimed in the darkness of Mrs. Petlove's boudoir that night this would have been the situation: The jealous Petlove and the exquisite Herbert would have borne away Higgs, each clasping a hand; the gushing Miss Pilkington would have clung to Hopson, plus a large telescope valise, family umbrella and other impedimenta; George Hargrove and Hilda were the only ones rightly paired, and they by chance. The illumination of the candle of the distracted Mrs. Petlove caused a kaleidoscopic re-arrangement. The note claimed by each when brandished by the jealous husband in the face of his wife was redeemed by Hopson for his Higgs, but its strange adventures had served their purpose in making six fond hearts to beat as three, Higgs and Miss Pilkington vieing with each other in their naive willingness. The audience was most generous in its appreciation of what was really a very pretty piece of amateur work all through.

Later in the evening refreshments were served in the southeast room, and punch in the booths in North and Memorial halls.

Miss Willard was chairman of the decorating committee, and Mrs. Hemstreet planned the perfect work of the reception committee. Miss Neal and Mr. Jones managed the farce. Mr. Frank Englehart was chairman of the refreshment committee and Mr. Shifflett of the programme committee. They all had good assistants in the members of the class, and others, working together willingly with the one object of expressing the formal welcome to the class of February '04 in as perfect a manner as possible.

**Osteopathy and Anatomy.**

The osteopathist is obliged to be a good anatomist. He cannot practice osteopathy at all unless he is. He is the fellow, who, when a patient presents himself, goes to work



C. S. CARR M. D., Editor Medical Talk.

to find out exactly what the trouble is. He looks upon a man as an anatomical structure consisting of a framework of bones, a network of nerves, a tangle of muscles, a web of lymphatic ducts, a complication of ligaments, blood vessels and viscera. To untangle and locate all the multifarious organs and tissues is his business.

He goes to work to heal a sick man much the same as an engineer would fix his locomotive. He finds a nerve crossed or stretched. He finds muscles tense or strained. He finds bones dislocated, or partly dislocated. He finds cartilages misplaced. He finds a thousand things that the average physician would never discover, never dream of. Hence it is that the osteopathist must necessarily be a good anatomist.

As a rule, these doctors carry the study of anatomy much further than the allopath, the eclectic or the homeopath. Even the most experienced surgeon knows nothing of anatomy in comparison with the educated osteopath. It may be that many of the cures of the osteopath are imaginary. It may

be that much they do in the treatment of a patient is needless or ridiculous, but the fact remains that in the study of anatomy they are close students, and in the diagnosis of disease they exceed all other schools of practice.

When Garfield was shot by the assassin Guiteau, some peculiar symptoms presented themselves. Several noted surgeons were in attendance but they gave no heed to these symptoms. The symptoms were a peculiar numbness on the inside of the thighs and a portion of the scrotum, together with a curious feeling in the bottom of the feet which the president himself described as tiger claws. The president recited these symptoms and they were reported in the newspapers. The doctors in attendance knew nothing of their significance and probably did not take them into account at all.

The professor of anatomy in the University of Pennsylvania, who happened to be a close student of anatomy, read in the newspapers the account of the president's symptoms. By reading the account this anatomist was able to locate the injury which the bullet made. It will be remembered that the doctors in attendance had great difficulty in locating the bullet; in fact, they never did locate it. It was never revealed during the life of the president where the bullet was lodged. The doctors supposed it to be in the right groin, but as a matter of fact the bullet had crushed the fourth lumbar vertebra and lay close to the back-bone on the left side of the body.

But this anatomist, who never saw the president at all, aided by the newspaper account alone, located the bullet exactly. The second day after the president was wounded he drew a chart showing the course of the bullet, the injury it had done and its lodging place. He presented this chart to numerous other professors who made affidavits to the fact. After the post mortem revealed that this anatomist was right, the whole account was published in the medical journals.

Had the doctors known where the bullet was located, their treatment of the president would have been considerably different. Had they known where the bullet was, a drainage might have been established preventing the accumulation of pus. The doc-

tors were trying to drain it from the groin below the entrance of the bullet. Consequently, everything they did to secure drainage from below was adverse to the president's recovery.

As is well known, President Garfield died of septicemia, that is to say, he died from the effects of the reabsorption of pus which was located in the pus cavity where the bullet lodged. Had they known where the bullet was, they would either have established drainage by cutting in upon the bullet through the back, or else have established the drainage through the track of the bullet. In other words, had these doctors who attended President Garfield been good anatomists, they would have done much more toward saving the president's life. It is possible, of course, that his life could not have been saved even if they had known where the bullet was, but it is also certain that they could have treated the case much more intelligently.

We venture the assertion that were such an accident to occur to-day and a good osteopathic physician be called, he would be able from the symptoms alone to locate the bullet. Emerging near the fourth lumbar vertebra there are some nerves which supply the portion of the body where the president located his symptoms. It was the disturbance of these nerve roots that caused the symptoms in parts of the body so distant from the wound. An osteopath would have known this at once because he makes a study of anatomy. He is a thorough student of the machinery of the human body.

The study of anatomy to the ordinary physician is almost a superfluity. That fellow who goes through the country with a bottle of tablets can give them out just as well whether he knows in which side of the body the liver is located or not. The average drug doctor never learns but mighty little about anatomy. Immediately upon beginning the practice of medicine he proceeds to forget what little he did learn. Indeed, he has no use for anatomy. He can purge and blister, give headache powders and visit any one just as well whether he knows anatomy or not.

But the osteopath, in order to practice the healing art according to the teachings of his

school, must go deeper and deeper in the study of anatomy every year. Every case that presents itself to him is another puzzle in anatomy, another problem in the structure of the human body. He traces nerves from origin to distribution. He locates the origin and attachment of muscles to bones. He knows the exact position of bones and the precise method of their articulation with each other. No ligament or artery, no cartilage or muscle, escapes his scrutiny or manipulation. This is what the osteopath must do in order to practice the healing art according to the teachings of his school.

And yet these are the men the drug doctors are trying to squelch. These indefatigable, conscientious delvers into the intricacies of the wonderful mechanism of the human body. These men who are trying to place the healing art upon rational, if not mechanical grounds of procedure. These are the men against whom is arrayed every school of drugging. The druggers have contrived all sorts of laws against them. The druggers say all sorts of malignant things about them. No slander has been left unsaid, no abuse has been skipped.

We are not attempting to say by all this that the osteopaths are all right and the drug doctors are all wrong. We do not mean any such thing at all. In our course of study it happened, however, that the study of anatomy was very thoroughly pursued. We had in view at the time to make the teaching of anatomy our profession. This has led us particularly to observe how little the average practitioner has use for anatomy. Therefore, while we do not feel exactly competent to compare the relative merits of osteopathy with the art of drugging, yet we feel warranted in saying that we are in a little better position for doing so than the average writer for medical journals. But we choose to refrain from drawing comparisons between the practitioner of osteopathy and the drug doctor.

But surely it is not going too far to say that if any squelching is to be done it should be done against those who are experimenting with dangerous drugs, those who are practicing that most confusing and contradicting of all arts included in the materia-medica and pharmacopoeia,—if squelching

is to be allowed at all, it should be against those and not against the men who are cautiously, carefully, safely, conscientiously, with painstaking detail trying to unravel the mysteries of disease and derangements by a tireless study of anatomy. If those drug doctors who spend their time blurting and braying against osteopathy would spend some of that wasted time in reading up on anatomy, they might after several years diligence catch up with the men against whom they are railing.

If any of the drug doctors read this article (and we know they will), we would advise them to observe this wholesome caution—in contending with those terrible fellows called osteopaths, don't ever introduce the subject of anatomy. If you are ever foolish enough to get into a controversy with them on anatomy they will lay you out so flat that you will wish you had never been born, or, at least, that you had been born right.—  
Medical Talk.

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## PERSONAL MENTION.

Dr. Elizabeth Crowder of Fairfield, Iowa, is now associated in practice with Dr. Oscar Pool of the same city.

Dr. J. C. Stone and Dr. Mary Gates have formed a partnership for the practice of osteopathy at Leon, Iowa.

Dr. Gambetta Staff of Meadville, Pa., whose arrest was instigated by the board of health of that city was acquitted after a three days trial. He informs us that he was greatly assisted in his trial by the many friends he has made for osteopathy and is especially indebted to Dr. J. B. Littlejohn of Chicago and Dr. E. C. Parsons of Meadville who appeared in his behalf. Dr. Staff informs us that his practice has improved to a considerable extent since his trial on account of the good results of his treatment that were testified to by his witnesses.

Dr. W. J. Rhysburger, the pioneer osteopath of Dayton, O., has removed his office to the sixth floor of the new Conover building, room No. 602.

Dr. Fred P. Millard of Kent, Ohio, in April will move to Worcester, Mass. and form a partnership with Dr. Chas. C. Reid. Dr. Reid has increased his office space from

three rooms to six to accommodate a growing practice. On the arrival of Dr. Millard they will put in an X-Ray department and have one of the most neatly furnished and elaborately equipped offices in the East. Osteopathy is rapidly gaining adherents in the East. Conservative people can see and understand truth when it is properly presented and are ready to accept all good things be they new or old. About the worst thing that threatens the scientific standing of osteopathy in the East, is that many of the masseurs are putting the word osteopathy in their cards for the prestige it gives them, and giving the people massage, calling it osteopathy; hence many people have the idea that osteopathy is massage. From such men as Drs. Reid and Millard people who come in contact with them will get a true idea of what osteopathy is.

Dr. L. E. Wyckoff of Bay City, Mich., is at present taking a post-graduate course at the A. S. O. Dr. Wyckoff graduated from this school June '98.

Dr. Thos. Ashlock of Williamsport, Pa., recently spent a week visiting his parents of this city. He has a prosperous practice at Williamsport.

Dr. A. Fisher, Jr., of Syracuse, N. Y., made the A. S. O. a pleasant visit during the past month. Dr. Fisher is one of the early graduates of the A. S. O. and has enjoyed an excellent practice at Syracuse for the past five years.

Dr. Geo. J. Eckert of Cleveland, Ohio, made the A. S. O. a pleasant visit during the latter part of the month. Dr. Eckert is one of the ablest osteopaths in Ohio and enjoys a large practice.

The following alumni visited the A. S. O. during the past month: Drs. Chas. McCoy, Ogden, Utah; Minnie Potter, Memphis, Mo.; Geo. C. Farmer, Oskaloosa, Ia.; Sada Farmer, Oskaloosa, Ia.; G. P. Meeke, Columbus, Nebr.; F. L. Tracy, Anderson, Ind.; J. H. Vernon, Glasco, Kansas; W. H. Brown, Moberly, Mo.; C. E. Ross, Ft. Smith, Ark.; E. E. Giltner, Osceola, Ia.; J. E. McGavock, Peoria, Ill.; A. D. Cain, Hannibal, Mo.; Henry Snedeker, Cincinnati, Ia.; P. D. Holloway, Independence, Kan.

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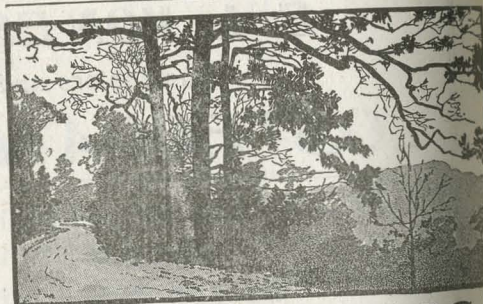
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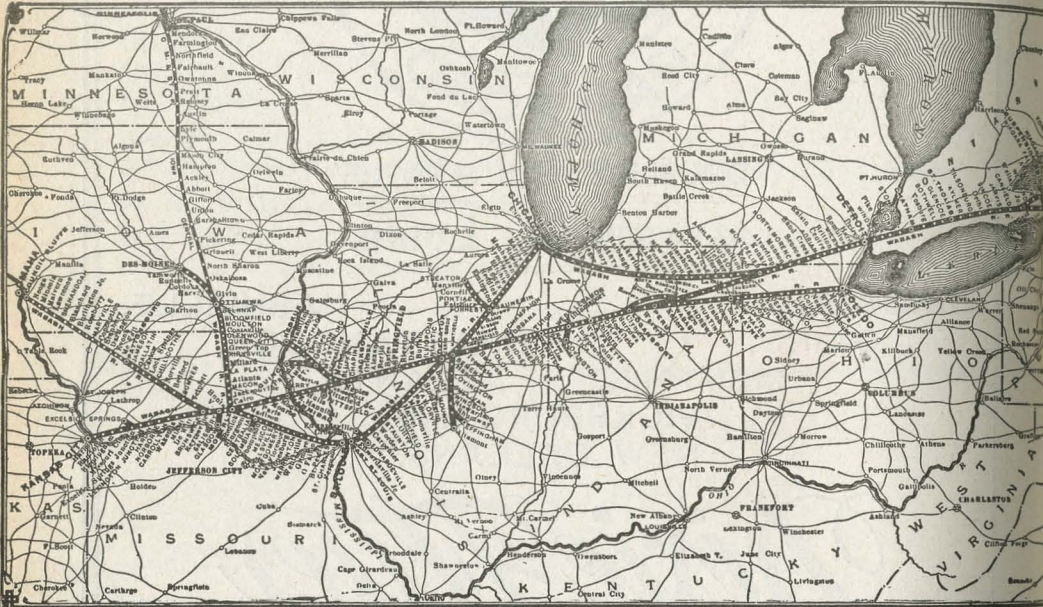
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