

The Osteopathic Physician

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The Osteopathic Physician

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Number 3

Other Osteopathic Factors

A. Still Craig, D. O., Kansas City, Mo.

WE all like sheep have gone astray." So said Isaiah, and I believe it is equally true of present day osteopaths.

You may have heard me express a similar sentiment; and you are welcome to the opinion, if you hold it, that it is I who have followed off some strange bellwether into by and forbidden paths.

I maintain that ten-finger osteopathy, is not, has not been, and cannot be a complete therapeutic system, and I believe further, that the idea that it is, has worked incalculable harm to the science.

Several years ago we reached the 5,000 mark, numerically, and so far as I can learn, this remains approximately our figure. An undue proportion of our earliest practitioners has either broken in health or abandoned the profession for other work. This result is not without a cause.

In the March A. O. A. Journal, Dr. Walkup bewails the fact that his corrected lesions do not remain corrected. He gets the cases of other practitioners, who have corrected the lesions, he corrects the same lesions and in time the patient may drift into the hands of other practitioners who have corrected the lesions. What's the use? Wherein lies the fault? Dr. Walkup says that the fault is not with the science of osteopathy, but that it is in "the depleted human system." Perhaps it is, but it is the business of osteopathy to overcome that "depletion."

How frequently, in osteopathic literature and discussion, does the question of whether we shall add drugs to our curriculae arise; but just as often it is solved and settled in the negative forever—till the next time.

Is there something so attractive and enticing about drugs in spite of the fact that medical literature is teeming with such statements as the following, from a late number of the *Medical Record*:

Leatham Reynolds records some experiments to show the effect of morphine on phagocytosis and it would seem that the morphine exerts a marked influence on the leucocyte. Not only does it check diapedesis, but phagocytosis is diminished in a marked degree, and the growth of the bacteria, on the other hand, is not appreciably affected. Morphine not only masks the symptoms, but it muzzles the phagocytes."

Yet with it all we seem to long for the "flesh pots of Egypt."

Is osteopathy, then, a failure? I answer that it is—and it is not.

Have you not had patients who have surprised you with the rapidity of their improvement, and then when you were expecting the greatest, they have ceased to improve, and, notwithstanding your best efforts, they have stood still for a time, and then gradually lost ground?

Perhaps later you took a little different tack, or some other practitioner did so, and the patient sailed on to health. In this case osteopathy failed and osteopathy succeeded. You

first removed some lesion and the system, relieved of its drag, responded rapidly, but later began to feel the weight of the other hindrance more markedly. Some other impediment had to be removed before health could be obtained.

From our collective patient, osteopathy has removed a lesion, and, on account of the effects of this, osteopathy itself has reached its present fame and prominence. This prominence was reached a few years ago, but for some reason its growth has been checked and the stoppage in growth too often means retro-



The above picture shows Dr. Merrel E. Thomas and Dr. Wm. E. Waldo hugging themselves with delight when they received the news that they had successfully passed the Washington State Board examination and were duly licensed to practice. Four osteopaths took the examination, and three passed. Both Dr. Thomas and Dr. Waldo graduated from A. S. O. with the June, 1910, class.

gression, and we don't want it to die on our hands.

Shall we go on complacently treating our patient and complacently talking about the weather, or shall we in desperation, bring in the hypodermic of a waning drug education to deaden the phagocytes until another osteopath comes along under some other name, and we are left in discredit? Rather let us scratch our heads and tweak our brains, and be the parties to advance the nation to health and ourselves to eternal credit.

I maintain that the fault lies with the os-

teopath and not with osteopathy. Ex-President Ray, of the A. O. A., I think in his inaugural, made the ridiculous statement, that what is good enough for Dr. Still is good enough for him. This is ridiculous, in that any American should limit his mental receptivity to the capacity of any finite man. I received one of the little old A. S. O. diplomas, upon which was given a definition of osteopathy, copyrighted in 1893 by A. T. Still. Copyrighted though it is, I think he will not object to my quoting it. On account of its intrinsic merits, though somewhat faultily worded and not because Dr. Still said it, it is a good foundation for us to build upon:

"The American School of Osteopathy, teaches, and has for its object, the keeping and maintaining a complete circuit of the forces of motor, sensory and sympathetic nerves, to and from the brain and all the organs, tissues, blood and other vessels; the bowels and all parts, and the whole of the human system that pertains to nourishment, strength and growth of bone, the skin appendages and soft parts of the body.

"Health is the result of the harmonious action of the system when all parts are unirritated by any cause, such as increased or diminished flow of the fluids of the arteries or veins or the nerve force, by partial or complete dislocation of bones, muscles, tissues, membranes or parts of the whole system. The object of osteopathy is freedom of flow of all electric or other fluids, forces or substances pertaining to life."

Our patient has ceased to improve because we have failed to live up to the duties and privileges of this definition. Our remedy, with the attendant renewed prestage and advance, must be brought about by living up to it. Dr. Still got out of the rut. We have been following his wagon track so closely that we have made a new one, and a rut is a rut for a' that. "The object of osteopathy is freedom of flow of all electric or other fluids, forces or substances pertaining to life." We will never, never, achieve this by *vertebral adjustment*. The digestive and the nervous system of the nation is all unstrung, and the cure lies in an absolute revolution of the methods of life which brought about this result.

I know this spells crank for me. The stand that Dr. Still took spelled crank for him and his immediate followers, but it also turned something, and something having been turned, the cranky part is forgotten. People have ceased to regard us as cranks. Let us be cranks and turn something. Otherwise disaster awaits us.

Manipulative osteopaths will not fill the country's need for physicians. If they should, I believe it would take an army several times the size of the present number of all physicians. A fewer number could not give the requisite treatments. How many families can you care for osteopathically?

What then shall we do? Let us be doctors, meaning teachers. Let us teach the people how to live. To do this I will admit we must do a little learning ourselves, but that will not really seriously injure us.

We can promote the "freedom of flow" by using the natural methods, not in connection with but as a part of our treatment. These are a part of osteopathy. By natural methods, I mean light, air, water, food, exercise and right

thinking, with especial attention to elimination. How necessary all, and yet how little attention we give them.

Your engine may be in perfect adjustment, but let certain parts of it stand idle and you will find that rust has done its work. Just as surely will you find that ashes, clinkers and soot will soon ruin it, no matter what the adjustment. Persons are rare in which these very conditions do not obtain, and in which adjustment is all that they need.

Shall I be specific? Our dietetic system, if system it may be called, is rotten to the core. I haven't time to be specific in this, but a thorough study of the subject from every standpoint, including medical and osteopathic standard periodicals, will eventually lead you to that conclusion. I shall be specific in touching one of those sore spots near an osteopathic center. We are not half correcting spinal lesions. We are shamefully neglecting them. I tell you the doctor quoted above *did not correct his lesions*. They are not corrected

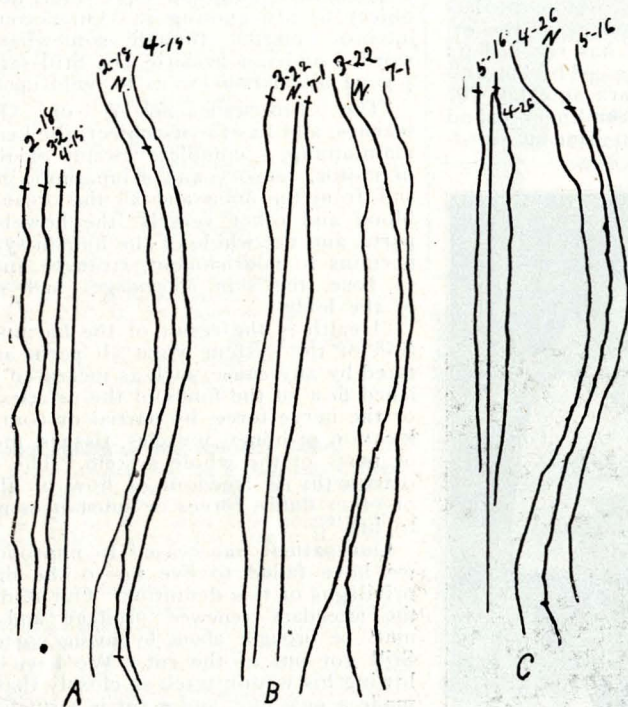


Figure 1.

till they are corrected to stay corrected. I shall demonstrate to you that spinal lesions may be and have been corrected without the touch of human hand. I took spinal tracings or spinograms of a number of students in the physical culture training school, at Battle Creek last year, and in about six months repeated the operation and the result in every case was a much more normal spine. In the very few cases in which the spine was approximately normal there was practically no change. These students corrected their lesions while paying absolutely no attention to them, but paying all attention to body building exercises, habits and foods. This, in spite of the theory held by prominent members of our profession, that exercise to a lesion will accentuate that lesion as the parts are unduly weakened on the side of the lesion.

Now a word relative to the spinograph. I have been working with different models for several years, having presented my first instrument at the Iowa association meeting at Cedar Rapids, in 1902. My present instrument works on the pantographic principle and the reader will note that the tracing is close enough often to outline the individual spinous processes. As to general accuracy, we must allow a little for the difference in posture and

position of the patient, but we have kept this as uniform as possible and the error is not great. Two tracings taken at or about the same time coincide very closely.

The types of normal spines, Fig. 1, with which the others are compared, are in the nature of a composite tracing of people of excellent physique. These tracings are also compared with the standard of Dr. Goetz and other authorities.

In Fig. 1, A, B, C, D, are the tracings of training school students, 1 being the first record, 2 the normal spine, and 3 the second tracing; these being, as noted above, about six months apart. A and B show anterior dorsal or straight spines and C and D the opposite condition.

These are but four of a considerable number of records made, the subjects being in "ordinary" health, yet showing much abnormality of spinal contour. I also recorded a number of minor lateral deviations. In no instance did the exercise to a lesion increase that lesion,

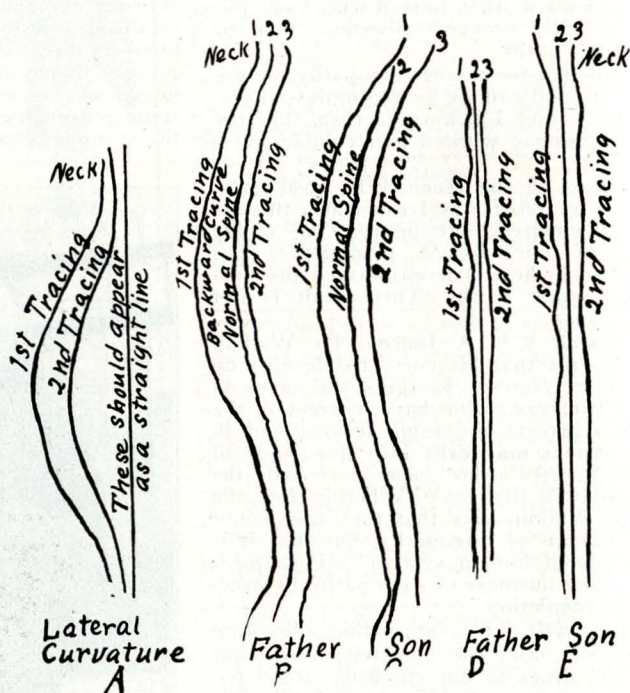


Figure 2.

but on the other hand every lesion showed more or less improvement. The tendency toward the normal spine was remarkable.

In the Journal of the A. O. A. for June, Dr. Meacham takes the position that there is no characteristic spine or thorax for tuberculosis. My records are not numerous enough to prove or disprove this, but I present some spines for what they are worth. In Fig. 1, A is the spine of one whose family history is all tubercular, though he had not developed actual disease himself.

That spine might easily have predisposed to the disease, but by exercise I believe that he overcame the hereditary tendency. E gives both the lateral and the antero-posterior tracing for a man who died a short time after of pulmonary tuberculosis. F is the antero-posterior tracing of a consumptive, while G gives the lateral and antero-posterior tracing of an asthmatic. B is the spine of a tall, slim, young lady, who grew very rapidly and developed an unusually straight spine. Six months brings out to a marked degree the normal curves.

Passing to Fig. 2, presented and explained in the August *Osteopathic Health*. A is the spine of a young lady of about 25. The time between tracings is two months and twenty

days, during which time she was not taking treatment of a graduate osteopath but of a man who gave all the twists and spinal work that an osteopath would give, and then some perhaps. I consider that the results obtained here were absolutely impossible except for the dietetic treatment and exercise which had put her in condition to improve. Her spine was not only curved but unable to support her. At first she was unable to support her head. Her condition might be aptly described by the term used by Dr. Abrams in his "Spondelotherapy," viz., spinal insufficiency.

The other spines shown in Fig. 2, having been described in the August *Osteopathic Health* I shall not dwell upon them here.

In Fig. 3 we have, first the lateral deviation and then the antero-posterior tracings of three of my private patients, with dates of the tracings. In A, a case of nervous dyspepsia, the lateral deviations are of especial interest. It will be noticed that the same deviations are noted in each tracing, but that these lesions

rapidly diminish in size. The physical condition improved commensurately. B is the case of a lady with marked lateral curvature, decided anterior dorsal and posterior lumbar. In fact, her normal spinal curves are practically reversed. She had been suffering almost constant sciatic pain and pain in the calf of leg for more than a year, and had been treating with various D. O.'s for nearly a year with some benefit, but the idea of doing anything toward correcting her spine at her age, about 30, seemed to be new to her.

She took but six treatments at this time, but I gave her specific direction as to exercise and diet. The pain disappeared. She left the city and took some further treatments of another D. O. and kept up her exercise and July 1st resumed treatment with me, thoroughly jubilant over her changed spinal condition. While, of course, this last tracing shows anything but a normal spine, some of the minor lateral conditions have disappeared, and her lumbar, while still posterior, is markedly improved, and the spines are not sore and irritated as before from friction against clothing, chairs, etc. In fact, a decided improvement in all curves is noted.

Not the least important factor in her case was the fact that her husband was connected

with the packing industry and she naturally adopted vegetarianism and suffered from lack of nourishment. This was overcome by substituting the proper meatless diet.

C is a case in which alopecia was the principle symptom. It is remarkable for the rapid change in the upper dorsal condition. The general health greatly improved with promise of improvement in the scalp condition.

The philosophy of some of these changes I shall have to leave for another paper, but the facts are as shown.

Should the reader be incredulous it is no more than I should be, were this written by another, and sometimes I can hardly believe it myself. I have my records and if they can be duplicated by pure manipulation I should be glad to know it, but I have not been able to do it. Osteopathy is broad enough if we will but use it and prove it.

Carnegie Report Raps Our School

Ralph Kendrick Smith, D. O., Boston.

WHILE the recent newspaper references to the report upon medical education published by the "Carnegie Foundation for the Advancement of Teaching," were devoted to the sensational scoring of allopathic and homeop-

are not without some truth. Our schools are owned privately. Let us remedy this by doing as all other schools of practice have done—secure gifts and legacies from grateful patients for the purchase and endowment of their institutions. Our catalogues must be revised if we wish the respect of intelligent people who want to see a dignity attached to osteopathy. We must eliminate from our catalogues the crude "come on" sentences calculated to persuade the stranger that osteopathy is a quick and easy way to make money.

The report also attacks the "mercenary character of osteopathic institutions," meaning the fact that clinic patients pay for treatment.

While refraining from the statement of any opinion upon osteopathy itself, which the report frankly says is none of its business, the author says, "with all possible emphasis, no one of the eight osteopathic schools is in a position to give such training as osteopathy itself demands."

Here follow the report upon our eight colleges: PHILADELPHIA COLLEGE AND INFIRMARY OF OSTEOPATHY. Established 1898. An independent institution. Entrance requirement: Nominal. Attendance: 26. Teaching staff: 18, of whom 11 are professors, 7 of other grade. Resources available for maintenance: Fees, amounting to \$18,900 (estimated). Laboratory facilities: These are

Ostensibly high school graduation; but "mature men and women who have been in business are given a chance and usually make good." Attendance: 85. Teaching staff: 38, 19 being professors. Resources available for maintenance: Fees, amounting to \$12,750 (estimated). Laboratory facilities: The school has an ordinary chemical laboratory, a fairly equipped laboratory for pathology, histology, and bacteriology, with a private laboratory for the instructor in these branches adjoining, the usual dissecting-room, and a limited amount of apparatus for experimental work in physiology. Clinical facilities: A dispensary is carried on at the school, which also owns a hospital for obstetrical and surgical cases. The catalogue fails, however, to state that the students have no regular work in this hospital. They rarely see medical cases; "they don't have as much acute work as they should." Nevertheless, they are drilled to "treat gonorrhoea by diet and antiseptics; syphilis with ointments and dietetics, and without mercury; typhoid, pneumonia, etc.," along the same lines.

Date of visit: May, 1909.

LOS ANGELES COLLEGE OF OSTEOPATHY. Emigrated from Iowa in 1905. A stock company. Entrance requirement: Less than an ordinary grammar school education, with conditions. Many of the students are men and women of advanced years. Attendance: Began two years ago with 60, now claims "more than 250." Teaching staff: 19. All the teachers are practitioners. Resources available for maintenance: Fees, the annual income being about \$37,500 from tuitions and a considerable sum from "treatments." "People are ready to pay for relief from distress and sickness. It is only fair to say that many of our graduates are earning as much in single months as they were formerly able to earn by a full year's work." As the instruction provided is inexpensive, the stock must be a very profitable investment. Laboratory facilities: The school occupies a five-story building containing a chemical laboratory, with meager equipment and limited desk space, and a single laboratory for histology, pathology, and bacteriology. The dissecting-room contains five tables, but sufficient material. The rest of the building is mainly devoted to treatment rooms and the business office. Clinical facilities: There is no free dispensary. Patients who are willing to undergo treatment before a class pay not less than \$3 a month; patients who are treated in the presence of a single student pay \$5. A hospital is now under construction. The general aspect is that of a thriving business. An abundance of advertising matter, in which the profits of osteopathy are prominently set forth, is distributed.

Date of visit: May, 1909.

AMERICAN SCHOOL OF OSTEOPATHY. Established 1892 and owned by two individuals. Entrance requirement: Less than a common school education. Attendance: 560 (ranging in age from 18 to 54 years). Teaching staff: 12, with 11 student assistants. Resources available for maintenance: Fees, amounting to \$89,600 (estimated). Laboratory facilities: These are absurdly inadequate for the number of students, as is likewise the teaching staff. A single room is used as bacteriological and physiological laboratory, a six weeks' course being given by one teacher to successive squads of 32. In the same way separate additional laboratories are provided for chemistry, anatomy, and pathology. Material for pathological demonstration is bought; there is no museum, and no effort is made to save gross material. The dissecting-room is foul. The "professors" in charge of histology, pathology, and bacteriology are senior students. Clinical facilities: A hospital of 54 beds adjoins, but its work is practically all "surgery"; obstetrical work is comparatively scanty. There is no other hospital in the town. A large dispensary is operated. An instructor is at hand the first time the student administers a "treatment"; after that, "only if summoned." A course of twenty lectures on the fallacies of medicine is given, so that the graduate will know why he does not use "drugs." The school is a business in which a large margin of profit is secured by

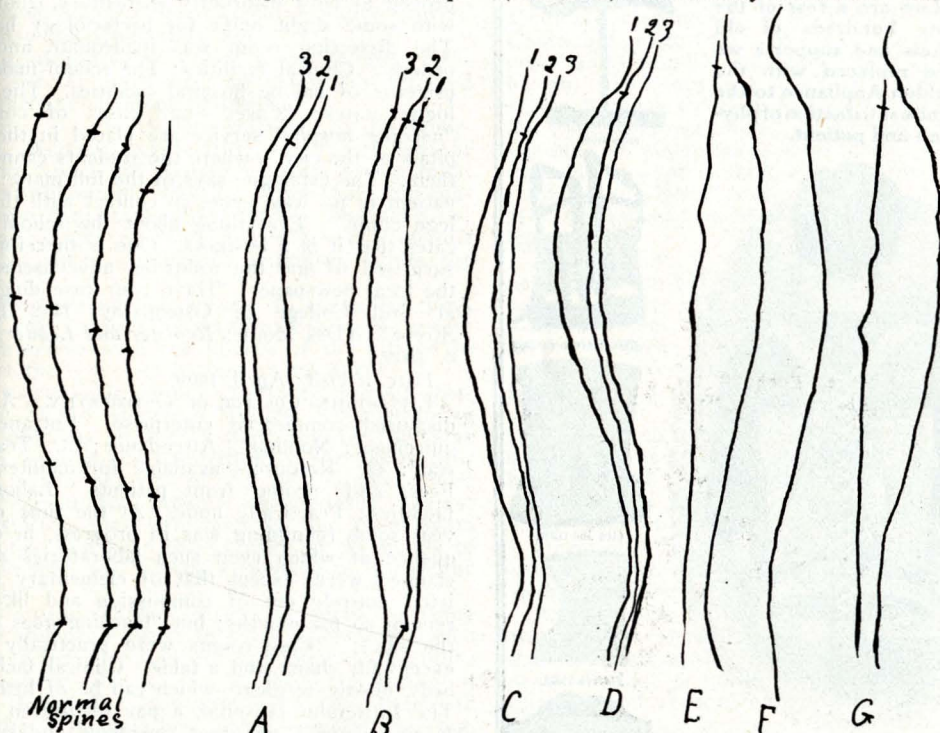


Figure 3.

athic institutions, poor little osteopathy was quite overlooked. But not so with the official document itself. Lest most osteopathic practitioners may be content with reading the newspaper reports and consequently pluming themselves upon their escape from the slashing criticism of general medical education, I have secured a copy of the book, which consists of three hundred and forty-six pages, quarto. A careful perusal discloses the fact that our colleges were not overlooked. After reading it we might wish that they had been. While we may rejoice that the general public was not told our shortcomings in the vigorous language in which it was informed that four-fifths of the M. D.'s were uneducated, incompetent, and ill-trained, it is best that we ourselves should not be ignorant of the verdict of the official inspector, who personally visited all of our schools. So I have copied verbatim his analysis of the situation at each of our colleges.

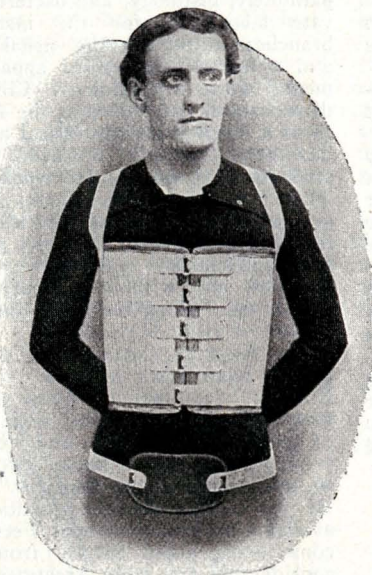
His principal criticisms are that our colleges "reek with commercialism," and that our catalogues are "a mass of hysterical exaggerations." These statements, although pretty strongly put,

utterly wretched. They comprise a laboratory for histology, in which a small centrifuge is the only visible object of interest; a small laboratory for elementary chemistry in a dark cellar; and an intolerably foul dissecting-room in a dark building, once a stable. If there is any provision for pathology, physiology, or bacteriology, any books, or museum, or other teaching accessories except a few crude drawings, a model, and a skeleton, all was successfully concealed. Three separate classrooms are provided, containing necessary furniture only. Clinical facilities: The infirmary, the address of which is not given in the catalogue, is some blocks distant; it contains three beds and has, it is claimed, 200 patients who come twice or thrice weekly for treatment. The catalogue announces that its students have the "privilege of witnessing operations at the University Hospital, Jefferson Hospital, etc." This is not the case. These students are intruders, without rights or privileges of any description whatsoever.

Date of visit: January, 1910.

PACIFIC COLLEGE OF OSTEOPATHY. A stock company, established in 1896. Entrance requirement:

As A Matter of Comparison



Some form of support is a necessity in ninety per cent of the cases of Spinal Curvature, Potts Disease, etc. These supports have usually been made of rigid, hard, unyielding material, which, while perhaps supplying the required support have other undesirable features, making the remedy almost as bad as the disease. Restricted respiration and heart action, hindrance to growth and development, muscular atrophy, scalded skin, etc., are some of the minor ills that accompany the wearing of jackets made of Plaster of Paris, Sole Leather, Steel, etc.

Here are a few of the many hundreds of old jackets and supports we have replaced with the Sheldon Appliance to the infinite satisfaction of physician and patient.

Here's The Comparison

This Sheldon Appliance is humane, cool and comfortable. It does not chafe or irritate even in the hottest weather. It provides just the required support, exerting a gentle, firm pressure where needed, yet permitting full respiration and proper muscular action. It lifts the weight of the head and shoulders off of the spine and corrects any deflection of the vertebrae. It weighs ounces where other spinal supports weigh pounds.

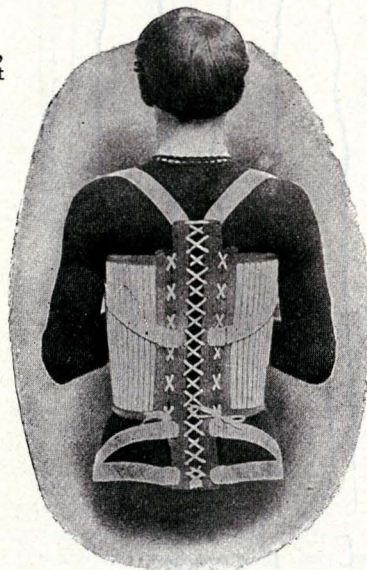
Every appliance is made to order, to fit the individual requirements of each patient in accordance with measurements taken by the physician. It is as easy to take off and put on as a coat. It cannot be detected through the clothing.

In over 15,000 cases, this Sheldon Appliance has produced results and given comfort to the patient far exceeding that derived from the usual Plaster of Paris or other unyielding Jackets.

We will be glad to send to any physician our plan for mutual cooperation which explains in detail just how the Sheldon Appliance is adapted to all forms of Spinal Curvature, Irritation and Pott's Disease.

We have fitted grandparents of 80 and over, and babies of a year and less.

Philo Burt Mfg. Co., 141 21st St., Jamestown, N. Y.



Laboratory facilities: Practically none at all; hopelessly meager appointments in two rooms are denominated respectively chemical and pathological laboratories. Dissection was not in progress at the time of the visit. It is held that "students ought to know anatomy before they dissect—they get more out of it." A single cadaver was dissected in September and October; another was expected in February. Clinical facilities: A pay dispensary is operated, senior students giving "treatments" to patients who pay three dollars a month. Students may on payment of fee attend public clinics at the City Hospital, but the school has no hospital facilities or connections of its own at all.

Date of visit: November, 1909.

STILL COLLEGE OF OSTEOPATHY. Organized 1898. An independent school. Entrance requirement: Less than a common school education. Attendance: 115. Teaching staff: 15, of whom 13 are professors. Resources available for maintenance: Fees, amounting to \$17,250 (estimated). Laboratory facilities: These are mainly limited to signs. "Anatomy" is painted prominently on a door which, on being opened, reveals an amphitheater; "Physiology" on a door, which, on being opened, reveals a class-room with an almost empty bookcase, but no laboratory equipment; the key to "Histology" could not be found; "Chemistry" proved to be a disorderly elementary laboratory with some slight outfit for bacteriology besides. The dissecting room was inadequate and disorderly. Clinical facilities: The school makes no pretense of having hospital facilities. The catalogue states: "Cases"—pay cases of course—"needing hospital service are placed in the hospitals of the city"—where the students cannot see them. The catalogue says of the infirmary: "The patient in no way comes in contact with the college clinic." Everything about the school indicates that it is a business. One is therefore not surprised to find the following advertisement in the local newspaper: "Have your case diagnosed at Still College of Osteopathy, 1442 Locust Street." (Des Moines Register and Leader, Nov. 3, 1909.)

Date of visit: April, 1909.

LITTLEJOHN COLLEGE OF OSTEOPATHY. An undisguised commercial enterprise. Entrance requirement: Nominal. Attendance: 75. Teaching staff: 43. Resources available for maintenance: Fees, and income from patients. Laboratory facilities: Practically none. At the time of the visit some rebuilding was in progress, in consequence of which even such laboratories as are claimed were, except that of elementary chemistry, entirely out of commission and likely to remain so for months; but "teaching goes on all the same." Class-rooms were practically bare, except for chairs and a table. Clinical facilities: beds, mostly surgical—which can be of little use. The Littlejohn Hospital, a pay institution of 20 It was claimed, too, that "medicine and surgery are taught in the school," and color is lent to the statement by the presence on the faculty of physicians teaching materia medica, etc.

Date of visit: December, 1909.

The Health Bill Primer

QUESTION.—What are the so-called "health bills" now before Congress?

Answer.—They are bills to establish National health departments or bureaus.

Question.—Who asks their passage?

Answer.—The "Committee of One Hundred on the Advancement of Science on National Health" and the American Medical Association.

Question.—What is the "Committee of One Hundred"?

Answer.—One of its members, Hiran J. Mesinger, when asked this question by Senator Crawford of South Dakota (Senate hearing, Owen bill, page 30), said: "The Committee of One Hundred is a committee that was appointed by the American Medical Association for the advancement of science."

its owners. The teaching furnished is of the cheapest kind. Its huge income is therefore largely profit.

Date of visit: November, 1909.

MASSACHUSETTS COLLEGE OF OSTEOPATHY. Established 1897. An independent institution. Entrance requirement: Vague. Attendance: 90. Teaching staff: 34, of whom 19 are professors. Resources available for maintenance: Fees, amounting to \$11,400 (estimated). Laboratory facilities: The school occupies a neatly kept building, in which are provided one poorly equipped laboratory in common for pathology and bacteriology, and another similar in character, for chemistry and urinalysis, and an anatomical room.

It possesses neither museum nor library. Instruction at the school building is limited to lectures, recitations, and "laboratory" work. Clinical facilities: No "treatment" is administered in the school building. For that the students resort in their last year to the Chelsea Hospital, a pay institution of 10 to 15 beds, more than one hour's journey from the college building. Pathology is taught in the same year.

Date of visit: October, 1909.

CENTRAL COLLEGE OF OSTEOPATHY. Established 1902. An independent institution. Entrance requirement: Nominal. Attendance: 40. Teaching staff: 20. Resources available for maintenance: Fees only, amounting to \$4,500 (estimated).

Question.—What is the American Medical Association?

Answer.—One of its prominent members, Prof. G. Frank Lydston, M. D., of the Faculty of the Medical Department of the University of Illinois, in an address before the Ohio Valley Medical Association, November 10, 1909, said: "Under the present political regime the American Medical Association has developed into a medico-political and commercial trust, which is the direct antithesis of what the machine which runs it promised it should be."

Question.—What are the provisions of the health bills?

Answer.—To "establish chemical, biological and other standards" and have charge of all the regulations "within the power of the National Government," etc.

Question.—What is a chemical standard?

Answer.—A standard of foods, drugs, etc., which could be fixed by this department or bureau without further congressional authority.

Question.—What is a biological standard?

Answer.—Webster defines biological as anything pertaining to animal life, hence "biological standards" must be standards of living for humans or the lower animals.

Question.—Do the bills carry police power?

Answer.—Ostensibly not.

Question.—What police power might, without specific authority, be arbitrarily exerted by such department or bureau?

Answer.—Dr. Welch, president of the American Medical Association, said to Senator Smoot (page 23. Senate hearing, Owen bill): "I would simply like to throw out the suggestion that it may be that the Federal Government can exercise larger powers in this matter than is generally supposed to be the case."

Question.—What reason is there to think that effort might be made to use such powers to interfere with the liberty of the citizen to select the school of healing of his choice?

Answer.—Dr. Henry O. Marcu, former president of the American Medical Association, in an interview in the *Boston Traveler*, on May 16th, said of the opposition to the Owen bill: "It is the old cry of the incompetents who practice under various designations against legislation that will tend to bar them from practice and keep the practice in the hands of those who will not be a menace to the public health."

Question.—What reason is there to think that the proponents of these bills desire such power for purposes not indicated in the bills?

Answer.—Dr. C. A. L. Reed, chairman of the legislative committee of the American Medical Association, says (Senate hearing, Owen bill, page 81): "The principle that is involved is the same—that the man in possession of the technical knowledge which gives him a scientific comprehension of his subject and his problem" (the doctors in charge of a department of bureau of health) "should have the executive authority to enforce that knowledge and not be overridden by a man who has no such technical knowledge, and consequently no such comprehension of the importance of the subject."

Question.—What is there to indicate the further intention of the proponents of the bills, if the "opening wedge" is secured?

Answer.—Prof. J. Pease Norton, of Yale university, in a speech before the American Association for the Advancement of Science, reprinted with approval in the *Journal of the American Medical Association*, said:

"1. It seems desirable that a United States National Department of Health should be established, having as its head a secretary, who shall be a member of the executive cabinet.

"2. The purpose of the department should be to take all measures calculated, in the judgment of experts, to decrease deaths, to de-

crease sickness, and to increase physical and mental efficiency of citizens.

"3. It should consist of the following bureaus:

"National Bureau of Infant Hygiene.

"National Bureau of Education and Schools.

"National Bureau of Sanitation.

"National Bureau of Pure Food.

"National Bureau of Registration of Physicians and Surgeons.

"National Bureau of Registration of Drugs, Druggists and Drug Manufacturers.

"National Bureau of Registration of Institutions of Public and Private Relief, Correction, Detention and Residence.

"National Bureau of Organic Diseases.

"National Bureau of Quarantine.

"National Bureau of Health Information.

"National Bureau of Immigration.

"National Bureau of Labor Conditions.

"National Bureau of Research, requiring statistics.

"National Bureau of Research, requiring laboratories and equipment."

Question.—Is there any indication of intent on the part of the American Medical Association to supersede or endeavor to dominate state health authorities?

Answer.—President Welch, of the American Medical Association, said (Senate hearing, Owen bill, page 24): "We have at present a very small number of good State boards of health. And why? I think to a very large extent because we have had no standard from the Federal Government; we have had nothing standing up above these local boards of health to indicate what is their duty in this matter."

Question.—How long has the American Medical Association been trying to secure such legislation?

Answer.—Dr. C. A. L. Reed said (Senate hearing, Owen bill, page 79): "Nineteen years ago in this city (Washington) that Association—the National body—adopted a resolution in favor of such a measure as this—in other words, in favor of a department of public health, with a secretary in the Cabinet." Senator Owen said (Congressional Record speech, March 24th, supporting a bill creating a Department of Public Health): "The American Medical Association, I understand, for twenty years has been trying to accomplish some results in this matter."

Question.—In what way have they been active in their effort to secure the passage of such legislation?

Answer.—Dr. C. A. L. Reed, in his report to the 1905 convention of the American Medical Association, said: "It (his committee) has secured a list of political leaders of every organized and recognized political party in the United States. It thus happens that we are able to move with a certain degree of accuracy in invoking political influence in behalf of such measures as are taken up by your committee."

Question.—Is this political committee of the American Medical Association still active?

Answer.—Under date of May 10, 1910, it sent a letter to members of the American Medical Association instructing them to "secure as delegates to conventions of ALL parties men favorable to the legislation now pending, planks in all platforms," and "to secure, if possible, a definite promise from each candidate for Congress to support such a measure, if elected. In the absence of such promise, to secure either an expression of the attitude of the candidates on the question or his refusal to make such expression. The position of all candidates, whatever it may be, should be made known to the electors BEFORE THE NOMINATIONS ARE MADE."

Question.—What are the departments or bureaus to cost?

Answer.—Prof. Irving Fisher, chairman of the "Committee of One Hundred," wrote a letter to a member of the American Medical

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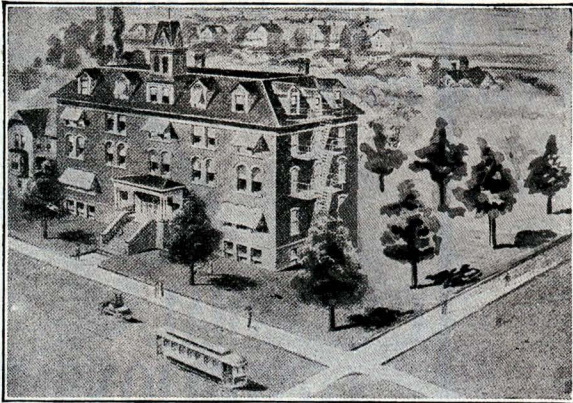
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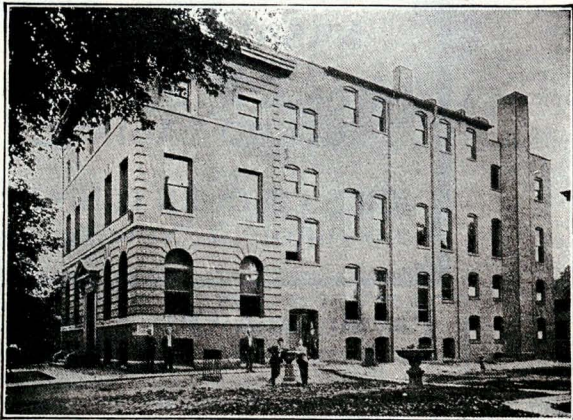
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Association, saying: "This is a project which if once started, will expand within a decade so that the Government will put millions upon millions of money into this much-needed form of national defense." (Senate hearing, Owen bill, page 67).—The National League for Medical Freedom.

New York State Board of Medical Examiners

ON June 9, 1910, the Philadelphia College of Osteopathy was formally registered by the Board of Regents as maintaining a standard which fulfilled the requirements of the law and the regulations of the regents.

This is the first osteopathic school to be so registered and it marks another advance in osteopathic educational standards. An advance, in that it requires a certain minimum amount of education before the student is permitted to commence his college work. This insures adequate preparation for a proper understanding of the scientific work to be done in the colleges.

This requirement of preliminary education makes it obligatory upon the matriculant that he have completed a four-year high school course in a standard institution, or its actual equivalent, such equivalent to be satisfactory to the Educational Department of New York.

One exception to this rule is that a matriculant who has completed three years of high school work in a standard institution may be admitted conditionally to the osteopathic course, provided that before the commencement of his second year counted towards his degree he shall have made up the lacking one year of high school work. This offers to the ambitious industrious student, who may be deficient in a portion of his preliminary education, the opportunity to make it up without the

loss of a year of his time. "By the actual equivalent" of a high school education is not meant the taking of an examination in certain subjects to test the fitness of the matriculant, but actual work done in an institution wherein the work is of equal preparatory value to that in a standard high school course.

To become registered in the State of New York therefore the Philadelphia College must require the preliminary education of all matriculants and their curriculum must cover in abstract and laboratory work, all that is expected of the registered medical colleges.

This forever does away with the oft repeated statement that the education afforded in an osteopathic college was not comparable to that in a medical college. The registering of this college side by side with the medical colleges in the State of New York is the final proof of the untruth of that statement.

The licensing examination in New York is therefore open to the graduates of the Philadelphia College of Osteopathy. The last examination was held on June 27th to 30th. The next examination will be held September 27th to 30th, and all those desiring to be admitted to the examination should make application to Mr. Chas. F. Wheelock, chief, examinations division, New York State Education Department, Albany, N. Y.

The requirements for admission to an examination must be completed at least one week prior to the examination. It is therefore advisable that any person desiring to take the September examination make application at once, that they may have all of their arrangements perfected well in advance.

Up to January 1, 1910, graduates after a three-year course from a registered school will be admitted to the examination. After January 1st, the applicant must have graduated from a four-year course.

There is one phase of the law in this state

that is either not generally known or but little understood, for up to the present time no one has taken advantage of it.

The portion referred to is that which an applicant who may be deficient in some of his preliminary requirements, or in the number of years of his college course, or both, may be admitted to the examination provided he can show five years of reputable practice in some other state.

This is of course optional with the regents, but if it seems wise to them they may admit to the examination, for instance a graduate from an osteopathic college, not registered by them as maintaining a satisfactory standard, provided the applicant can show five years of reputable practice elsewhere, they may even admit the applicant to the examination though he be not a graduate of a registered college and lack some of the prescribed preliminary education. This is entirely within the discretion of the regents, but the applicant can lose nothing by the attempt.

I call attention to this phase of the law for the reason that there may be some graduates from the two-year course in the earlier years which might desire to be admitted to this state. The regents may in their discretion accept their five years of practice as the equivalent of the other year in college now required for admission to the examination. Such an applicant would not be deficient but one year of the college course, whereas after January 1, 1911, when the four-year clause goes into effect he would be deficient two years.

Any one considering making an application for permission to enter the examination in New York can secure a copy of the law with notes thereon by writing to the New York State Education Department, Albany, N. Y.; and making a request for "Handbook No. 9," or by simply asking for a copy of the law

relative to the practice of osteopathy in this state.

I would urge that any one who desires to enter practice in New York communicate at once with the Education Department that their arrangements may be completed at the earliest possible date. The osteopathic profession in New York are very much pleased to have an osteopathic college registered as maintaining the New York standard and are pleased to welcome to the state all who comply with the standard laid down.—*Ralph H. Williams, D. O.*, Osteopathic Member, New York State Board of Medical Examiners.

Hard Work on a Vegetable Diet

THE results of experiments showing that hard work may be done on a vegetable diet, with less consumption of food than under ordinary circumstances, have just been announced in France. Says a correspondent of the *Revue Scientifique* (Paris, March 5):

"In 1905 Mr. T. Tissier introduced a method of treating intestinal affections based on the transformation of a pathologic growth of microbes into a normal one. It consists, in the first place, of rendering the intestinal medium uninhabitable to noxious species and favorable to all those that can arrest putrefaction. Finally, to hasten the establishment of this preventive growth, it administers pure cultures of these beneficent microbes. This author prescribes a diet in which the carbohydrates occupy the larger part, while the proteids are reduced to a strict minimum; beef tea.

"It is an ascertained fact that this diet has given remarkable results; but, considering its extreme severity, it is legitimate to ask whether it may be followed without danger by a normal adult who is doing intellectual and physical work. The author himself asks this question, and to answer it he has made experiments that have now lasted two years. The results were published on January 14th last.

"His investigations were made on two adults (43 and 33 years), the one a physician and the other a chemist, who have subsisted on the Tissier diet since October, 1907.....

"The food appeared sufficient, although besides their usual work they walked, cycled, and took exercise in the open air.....

"The author desired also to ascertain whether this diet remained sufficient in case of greater physical activity; to this end the two subjects took walks of 10 to 20 miles without increase of ration, but nothing abnormal occurred..... The subject of 43 years took, during the month of April, 1909, a ride of 125 miles on his bicycle, with a ration slightly larger than usual.... The loss of weight was only a little over a pound..... and the cyclist had neither curvature nor insomnia.

"The author calculates that for an adult of the same weight and age, with the ordinary diet, he consequently forbids meat, eggs, milk, and cheese, and prescribes all the fruits and vegetables, with the exception of the seeds of leguminous plants, too rich in nitrogenous substances.

"This is a vegetarian diet in the full acceptance of the word. To make it more attractive, Mr. Tissier admits the animal fats and all condiments of the same order containing less than one per cent of albumin—butter, oily bouillon, and there would have been necessary to accomplish the work..... at least four times the ration allowed the subject of this experiment. It seems, therefore, to be proved that the vegetarian diet of Tissier is amply sufficient, not only for the needs of ordinary life, but for important physical work."—*Translation made for The Literary Digest.*

It will be interesting to osteopaths to know that the conclusions of Mr. Tissier were anticipated and sustained by the experiments and investigations of Dr. Newton A. Boles conducted previous to 1906 and results of which were reported in the August, 1906, number of *The Journal of the American Osteopathic Association*. Whether or not man will ever return to a vege-

table and fruit diet the fact seems to be clearly demonstrated that he would be free from many complaints that afflict him, if he would do so. There can be little doubt also, that with the American people especially overfeeding is a very common habit.

One View of Osteopathy and the Osteopathic Physician

Fred K. James, D. O., Chicago.

THE science of osteopathy is rapidly advancing to the front ranks as a greater factor among schools of medicine and is slowly and surely making itself felt among drug practitioners as being an addition to the various schools of medicine; and instead of being simply osteopathy, it will, or should be at least, considered as the osteopathic school of medicine in the same sense in which hemeopathy, eclecticism and the regular system are considered schools of medicine.

If one should take the meaning of the average writings on osteopathy in a literal sense, he would consider it as a separate department of the healing art. To be sure it is distinctive in its character, but at the same time we should not lose sight of the fact that it is one



This picture shows one of the festivities at the reunion of the June, 1905, class of the S. C. O. at the San Francisco convention. The class numbered fifty-eight and there were nine at the reunion. The California cool breezes and sunshine seems to have made them all feel young again.

of the schools of medicine. In the dictionaries of repute we will find medicine defined as any remedial agency which cures, tends to cure, or alleviates disease.

Ever since osteopathy came into existence, the laity, the drug practitioners and in fact many of us, have understood the term medicine as pertaining to drugs only; and yet should any one undertake to practice osteopathy in Illinois, or in many other states for that matter, without a license from the board of health, he would be liable to arrest on the charge of "Practicing medicine without a license."

Therefore, I claim that osteopathy is a school of medicine, and the only particular difference between the drug practitioner and the osteopathic practitioner is in the different application of therapeutics. We are all holding the same ideal, namely, to aid nature in the cure of disease, regardless of the school from which we graduated: why then are we not all—homeopath, regular, eclectic and osteopath—medical practitioners in the broad sense of the term, and why should not the degree M. D. be conferred upon all graduates who have proper qualifications?

Osteopathy should be broad enough to include the prescribing of drugs and the use of surgical measures wherever and whenever indicated, and every practitioner will surely agree with me that drugs are more or less essential in surgical operations and in obstetrical cases for antiseptic purposes if for no other reason. As long as antiseptics and anesthetics must be used, and as long as we have patients to deal with who have been under drug treat-

ment, it is up to us as osteopaths to have as good or even a better knowledge of the physiological and therapeutic action of drugs than the drug practitioners.

As long as we insist on separate examining boards in the various states, just so long are we concealing our true worth from the public view, and many persons whose attention has not been especially attracted to the full meaning of osteopathy will be kept in the dark concerning it. Many of our early practitioners made the sad mistake of objecting to the title "Doctor" and naturally when they afterward applied to the various law-makers for legislation, the drug practitioners began to "sit up and take notice" and wonder why we wanted special laws; consequently, they have fought us, are fighting us and will continue to fight our methods of getting recognition until we make our claims on a more rational basis.

We are greatly indebted—more so than many of us realize—to practitioners of the older schools for the many valuable textbooks and articles on research work that have appeared from time to time, and for this and many other reasons, we should strive to make friends of the drug practitioners whenever they will meet us half way, and my experience has been that the majority of them will more than meet us half way if they are approached in the proper spirit.

Let us then do less fighting, raise our ideals and standards up to at least an equal with the other practitioners and endeavor to "make good" all our claims, insist upon equal rights with other practitioners and our science will win out permanently.

The drug practitioners have been termed by many of the osteopaths as narrow, conceited, etc., but I believe that if we would "Cast out first the beam" from our own eyes and look about us with careful observation, we would discover that we are just as narrow and conceited as they are. The osteopath who says there is nothing good in drug medication is just as narrow as the drug practitioner who claims there is nothing good in osteopathy.

Let us make our claims, our standards, and our ethics on an equal basis with other practitioners.

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Editorial

Fairness! Freedom! Fearlessness!
"New to the line, let chips fall where they will"

Vol. XVIII SEPTEMBER, 1910 No. 3

To the Profession

I wish for the benefit of osteopathy that the October issue of OSTEOPATHIC HEALTH, the "Osteopathic Hand Book," might be put in the hands of every newspaper and magazine editor, every judge, every jurist, every lawyer and every man of affairs—especially so in communities where osteopathy has been assailed and misrepresented, as the mere presentation of osteopathy from its institutional side and the record of its status in the laws and courts, saying nothing of its therapeutic achievements, cannot fail to give such men of intellectual capacity a comprehension of osteopathy that they have never before enjoyed, and it is bound to create a tremendous influence in our favor.

This is an opportunity for aggressive, forceful, effective educational work of a high order in which I most sincerely hope every osteopathic physician will make an effort to participate.

Concerted action along this line will win much new appreciation and respect for osteopathy in the mind of the intelligent public.

HENRY STANHOPE BUNTING, D. O.

The New York Decision

The decision of Justice Putnam, of Brooklyn, adverse to the application of Dr. Charles F. Bandel for a mandamus to compel the Board of Health of New York City to issue a burial permit on a death certificate signed by him, will be a disappointment to D. O.'s throughout the country, as well as to those immediately affected in New York state. It is highly desirable for the cause of osteopathy that our science secure complete recognition in the Empire state.

Presumably the decision is technically correct, but Justice Putnam seems entirely to

overlook the element of class legislation in the rule of the board, in that it distinctly benefits a special class of physicians and enables them to hold a club over a competitive system. As to the right of the individual to select the physician of his choice with assurance that said physician will be permitted to perform the necessary legal duties in case of demise, under the decision there would appear to be no such right. A man may select a physician of his preferred school, but if he is foolish enough to die under his treatment his estate must pay tribute to the privileged cult before his remains can be disposed of.

Truly a ridiculous situation!

But we cannot believe that the intelligent citizenship of New York state will endure such a grotesque condition when it is fully understood and appreciated. A big educational campaign should be inaugurated and public interest so awakened and aroused as to secure either an amendment in the state law or, better still, the enactment of a new law recognizing osteopaths as qualified to perform all the functions of physicians and establishing an independent board of registration and examination. It will take a hard fight no doubt, but it is not impossible; and if our practitioners in New York state work together harmoniously and with a single purpose, the end will be accomplished.

Here's to an osteopathic law and an independent board in New York State!

A. M. A. Political Pot Begins to Boil in Illinois

DOCTORS of Chicago and Illinois got busy politically last week by issuing endorsements of legislative candidates for primary nomination according to a report in the *Chicago Tribune*, which says in part:

The selections were announced in letters, each letter covering a senatorial district, addressed to physicians living in the respective bailiwicks.

The peculiar feature of the communications, which purported to be signed by officers of the Chicago and Illinois Medical societies, was that most of the signers pleaded ignorance of the endorsements or the use of their names in support thereof. Dr. Charles J. Whalen, a former health commissioner of Chicago, was disclosed as the prime mover in the appeals.

"We were authorized to issue these circulars six months ago by resolutions adopted by the two medical societies," said Dr. Whalen, when interviewed.

"Did the officers whose names were signed know about the letters?"

"Oh, yes."

"Dr. Cotton and others say they never heard of the recommendations."

"We were authorized to prepare the reports."

"Who attended the meetings?"

"I don't recollect."

"What were the tests that decided indorsements,"

"The records of the legislators."

"But in the Seventeenth district you have indorsed Cataldo, Burns, De Andrea, Hogan and Rissman, who never were in the legislature."

"That was because they signed our card of pledges."

The card referred to asked a promise to oppose bills granting state licenses to osteopaths and opticians as also any legislation that would give the stamp of legality to practitioners of "faith healing" and its variations. Measures such as these have been successfully opposed in the general assembly for many years.

This is Sample Circular

The circular for the Seventeenth district on letter-head paper of the Chicago Medical society, also bore the typewritten signatures of President A. H. Ferguson and Secretary George E. Suker of the Chicago Medical society and Secretary E. W. Weis, Ottawa, and Dr. M. S. Marcy, Peoria, of the Illinois Medical society.

"In the primaries of the respective political parties to be held September 15," says the Seventeenth district circular, "the following candidates in the seventeenth senatorial district are deserving of consideration at the hands of the medical profession: Messrs. Cataldo, Burns, De Andreas, Hogan, Rissman, each having agreed if elected to support the medical profession in the forty-seventh general assembly. Deserving of special consideration is Edward Smejkal for valuable services rendered the medical profession at the last session.

"Every family in the Seventeenth district is attended by some member of our profession. Our power is great if we make a concerted move. It is up to you to do your part. Will you do it? Let us hear from you.

"Most voters have no special choice and few will refuse their family doctor such a trivial request as voting for his friend. Now doctor, get busy. There is another point you want to remember, if you happen to be of opposite political faith it is no reason that you have

not fifty or a hundred friends that you can see who are of the same political faith as the candidate. Don't forget the 'personal favor.' We ask you to see 50 to 100 friends that are voters. Do you realize what this means? Eleven thousand physicians in Illinois seeing the number indicated would amount to the following: 11,000 times 50 equals 550,000 voters. This means victory, something that each individual physician should feel proud of. Talk it over with your brother practitioners and clients."

It is hard to beat this for cold blooded degeneration of professional reputation and influence to partisan political purposes. In the eyes of the political M. D. the only qualification necessary to fit a man for office is that he steadfastly uphold certain measures that the M. D.'s are introducing. Provided he agrees to do this he is to be supported regardless of reputation and record of other matters.

Particularly interesting also is the insidious suggestion to request votes from patients as a personal favor. The medical profession is certainly in a bad way when it becomes necessary to attempt to secure a monopoly of the healing profession by certain cheap political methods. Sober and unbiased consideration of all this political turmoil in the ranks of the M. D.'s leads inevitably to one conclusion; namely, that they realize that they cannot make headway against osteopathy on the basis of results obtained for patients, hence the desperate effort to perpetuate their power by legislative enactment barring competitive systems. In their anxiety to entrench themselves, the M. Ds. are going too far and by disgusting the intelligent laymen with their methods they are likely themselves to defeat the ends they are attempting to attain. Governor Deneen, of Illinois, in one of his campaign speeches took occasion to state that a candidate's attitude on the osteopathic issue, or any other special issue, was not a safe criterion to accept in judging a man's qualifications for office; but that his reputation, record and general fitness should be considered as a whole.

Court Decision Places New York Osteopaths at Mercy of M. D's. for Burial Permits

O STEOPATHY came out a loser in New York State in the effort to clear up the legal status of osteopaths as regards burial permits. The test came up in Brooklyn before Justice Putnam of the Supreme Court, and was based on the application of Dr. Chas. F. Bandel for a mandamus to compel the Board of Health to grant a burial permit on a death certificate presented by him. In handing down his decision Justice Putnam said, in part:

"While the state has wisely allowed the practice of osteopathy, it does not follow that it thereby holds out one, without any practice in surgery or experience in prescribing drugs, as fully qualified to certify the cause of death. Indeed it is not certain that a board of health would be compelled to take the certificate of death of all licensed physicians in the event of an epidemic or the spread of some new and mysterious disease.

"Granted that the theoretical education of the osteopath is of a standard equal to that of a doctor of medicine, after he enters on his profession his practice is restricted, so that it does not appear that he can make the tests by examination of blood and tissues by which alone many diseases can be certainly detected.

"The sanitary code is discriminatory, but the discrimination is not personal and arbitrary. It is based on a limitation which the osteopath may be said to make for himself, and deprives him of no rights which he ought to exercise consistent with the public safety."

This is a severe blow to osteopathy in the Empire state, and should stimulate our practitioners there to renewed effort to make the principles of osteopathy familiar to the general public, as it is only through an enlightened conception of the fundamental causes of sickness that we can hope to secure modification of existing laws relating to vital statistics and medical jurisprudence. A decision of this kind illustrates the difficulties under which a radically new system has to develop and progress.

The idea that drugs taken internally are absolutely necessary to overcome disease has been fixed in human thought so long that, until recently, all medical regulations were formulated with only this system in mind, and consequently the phaseology and construction of the statutes and precedents, render the recognition of any other system almost impossible. The decision of Justice Putnam indicates that, in his mind, the State would be in grave danger were we to attempt to decently bury our dead without a conscientious effort to in some way connect drugs and chemicals with the incident and determine their responsibility for the demise.

However, the world does move, and slowly, but surely, we are becoming more rational on this subject, and some day the technical medical cause of death, provided there is no indication or suspicion of foul play, will not be regarded with such veneration by the public or considered so imperatively important in the issuing of burial permits. We shall become more and more absorbed in a beneficent and gratifying endeavor to improve the physical condition of the race in keeping our friends and dear ones alive and in good health.



THE ELIXIR OF LIFE.

BY A. M. MARTIN.

(Written after reading "Osteopathy vs. Antitoxins," by W. Banks Meacham, D. O.)

The Elixir of life where may it be found,
Is a question asked by the most profound;
Alchemy and pharmacy have engaged in the strife
For the long sought prize, the Elixir of life.

Aconite and strychnine and belladonna, et al;
Did not fail to receive a gentle call
To give up the secret of the Elixir of life,
Which science inferred they might hold in the strife.

The innocent child with a fever mild
Was treated with aconite in Elixir beguiled,
It died and was laid in a lonely grave,
A victim of science which failed to save.

The mother's care and the mother's strife
Was to save from death her dear child's life,
She did not know she had been too free
With the Elixir of life she presumed it to be.

The mysterious microbe has been brought to view
By the help of the lens and a culture true
And vivisection, to aid in the bitter strife
For the long sought prize, the Elixir of life.

The toxin of diphtheria, of cholera and plague
Vivisection has tried on the equine, bovine and swine
To produce an antitoxin a veritable cure
For all the ills that man may endure.

An axiom in nature which is true in man
Like causes produce results the same,
A toxin vivisection inserted in a vein
Will produce a toxin in return again.

If gravitation guides the planets in the sky
Will gravitation cease when atoms fly,
If one lone grain of aconitine kills
Will one-decillionth of a grain cure human ills.

The Elixir of life where may it be found,
Is a question asked by the most profound;
Let reason infer it is only found
Where pure food, pure water and pure air abound.

A CLEVER SCHEME.

One of the reasons for establishing a National Medical Bureau—or Doctors' Trust—appears in this extract from an official organ:

"Of course a department of public health looks dangerous to the Christian Scientists and osteopaths. What the states have not been able to do the United States may succeed in doing; that is, putting a stop to these forms of medical graft."—*Cincinnati Lancet Clinic*.

"Dangerous?" Well, we should say so!
Little time would the "Old School" lose before wiping out the osteopath, who is daily curing cases where the Old School fails. When a man beats you on your own ground it is

time to wipe him out—if you can.

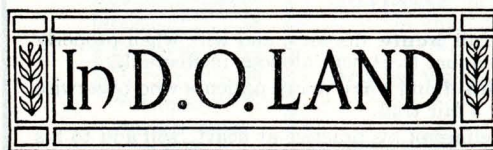
The advocates of this trust take no interest in that large proportion of the thinking public who prefer the osteopath and find health in his treatment.—*Life*, July 21, 1910.

HISTORY REPEATS ITSELF.

Governor Fort, in refusing to help the New Jersey Medical Society drive out the osteopaths, said to one of the doctors: "The gentleman who has just spoken has himself told me that he has had patients whom he sent to osteopaths for treatment. His own wife is one of them. I am another. When I had a broken rib last year, Dr. Schaufler himself advised me to consult an osteopath."

This recalls Senator Platt's reply to the New York doctors when his aid was implored to prevent the osteopaths from practicing in this state:

"Why, gentlemen, as osteopathy cured me when everything else failed and I still depend on it, I might seem ungrateful if I drove them out of business."—*Life*.



Sent Twenty-Four Out of Sixty-Two.

Oregon sent twenty-four attendants to the A. O. A. convention at San Francisco out of a total membership of sixty-two in the state.

Take Financial Interest in the A. S. O.

Mr. Fout, of the Citizens' National Bank, Kirksville, and Mr. Eugene C. Brott, formerly of St. Louis, have purchased a stock interest in the American School of Osteopathy. Mr. Fout will be a trustee and Mr. Brott will act as assistant secretary and treasurer.

Arkansas State Board Officers.

The State Board of Osteopathic Examiners of Arkansas met July 5th at Little Rock and organized as follows: Dr. C. A. Dodson, Little Rock, president; Dr. L. Cummings, Hot Springs, vice president; Dr. A. A. Kaiser, Lonoke, secretary; Dr. A. W. Berrow, Hot Springs, treasurer. Dr. Lillian Mohler, of Pine Bluff, is the other member of the Board.

Washington State Examination.

At the recent examination held by the Washington State Medical Board there were one hundred and seven applicants for license, including four D. O.s. Seventy-nine passed, including three D. O.s. The proportion of osteopaths who passed was creditable but it seems that there should have been more of them. If there is room for seventy-five new M. D.s in Washington state there is assuredly call for more osteopaths.

Dr. Carrie C. Classen on Michigan State Board.

The Governor of Michigan has shown his appreciation of the services of a woman on the State Osteopathic Board by appointing Dr. Carrie C. Classen, of Ann Arbor, Mich., to fill the vacancy caused by the expiration of the term of Dr. George Smith. The term of Dr. Classen commenced May 1st and she participated in the examinations held at Ann Arbor, June 21st, 22d and 23d.

Minnesota State Meetings.

The Minnesota State Osteopathic Association will hold its annual meeting at Lake City October 1st. An especially attractive program has been prepared.—*L. S. Keyes, D. O., President*.

Boosting His Town.

A surgeon in a Western town, engaged to perform an operation of minor character upon a somewhat unsophisticated patient, asked him if he were willing to have only a local anaesthetic.

"Sure," replied the other, "I believe in patronizing home industry whenever you can."—*Tit-Bits*.

He Had Faith in the Doctor.

A young English laborer went to the register's office to record his father's death. The register asked the date of death.

"Well, father ain't dead yet," was the reply; "but he will be dead before morning, and I thought it would save me another trip if you would put it down now."

"Oh, that won't do at all," said the register. "Why your father may be well before morning."

"Ah, no he won't," said the young laborer. "Our doctor says he won't, and he knows what he's given father."—*Fraternal Monitor*.

Central College Announcement.

The eighth annual announcement of the Central College of Osteopathy, Kansas City, Missouri, is an attractive booklet, illustrated with several half tone plates. The plates show good half tones of the various classes since the organization of the college and these illustrations, together with information contained in the book, show that the college is making substantial progress.

San Francisco Free Osteopathic Clinic.

The San Francisco Osteopathic Association has opened a free osteopathic clinic, at 1122A Turk street, for the benefit of the sick poor. It is hoped that many of the crippled children of the poor will take advantage of the osteopathic treatment.

New Officers For A. T. Still Research Institute.

At the recent meeting of the directors of the A. T. Still Research Institute, Dr. Charles Hazzard, of New York, was elected Chairman and Dr. Alice Patterson Shibley, of Washington, D. C., was elected Secretary of Council.

Miss Felice Lyne Goes with Hammerstein.

Some months ago we had the pleasure of announcing the success in vocal work of Miss Felice Lyne, daughter of Dr. Sanford T. Lyne, of Kansas City, Mo. Because of her osteopathic connection our readers will be interested to know that Miss Lyne has continued to achieve remarkable success in her work, and that she has accepted a contract to sing with the Hammerstein Grand Opera company in London next season, and will later tour the United States. Miss Lyne is only twenty-two years of age and commenced her serious musical study three years ago under Mme. Marchesi of Paris.

Osteopathy and the Optometrists.

At the annual meeting of the Wisconsin Association of Optometrists, held at Fond du Lac, July 25th and 26th, osteopathy came in for considerable discussion in the programme. The two representatives of osteopathy in Fond du Lac, Dr. F. A. Wright and Dr. E. J. Brietzman, both presented papers. Dr. Wright spoke on "Osteopathy and Its Relation to the Eye," and Dr. Brietzman presented "A Quiz on Osteopathic Treatment of the Eye." C. G. Waugh, of Milwaukee, spoke on "The Eye and Its Relations to Osteopathy."

Osteopathy Discussed in the Taylor-Trotwood Magazine.

The *Taylor-Trotwood Magazine* for August contains an article by Dr. Carey T. Mitchell, of Nashville, Tenn., on "Osteopathy; What It Is, and What It Accomplishes." It is a brief popular discussion of the subject that is well calculated to excite in the reader a respect for the science and a desire to know more about it, especially if he has friends or relatives suffering from sickness. The article should help considerably to bring osteopathy to the serious attention of thinking people throughout the south.

Dr. Spates Was at the Convention.

Through some oversight the name of Dr. Edward M. Spates, of Chicago, was omitted from the official list of osteopaths in attendance at the San Francisco convention. As a result his name did not appear in the list of attendants published in *The Osteopathic Physician* last month. Dr. Spates was at the convention and thoroughly enjoyed the many good features of the program and the hospitality of the hosts.

Arkansas State Association Meeting.

A regular meeting of the Arkansas Osteopathic Association was held at Little Rock, July 5th. Dr. L. G. Higginbotham, of Pine Bluff, presented a paper on "Aids and Hindrances to the Successful Practice of Osteopathy," and Dr. H. D. Cupp, of Memphis, Tenn., gave an address on "Pioneer Osteopathy in Arkansas." Dr. Cupp was the first osteopath to register in Arkansas, and was immediately arrested after his registration and was not allowed to practice until after a court fight. Dr. A. G. Hildreth, of St. Louis, was a guest of honor and delivered a public lecture in the afternoon.

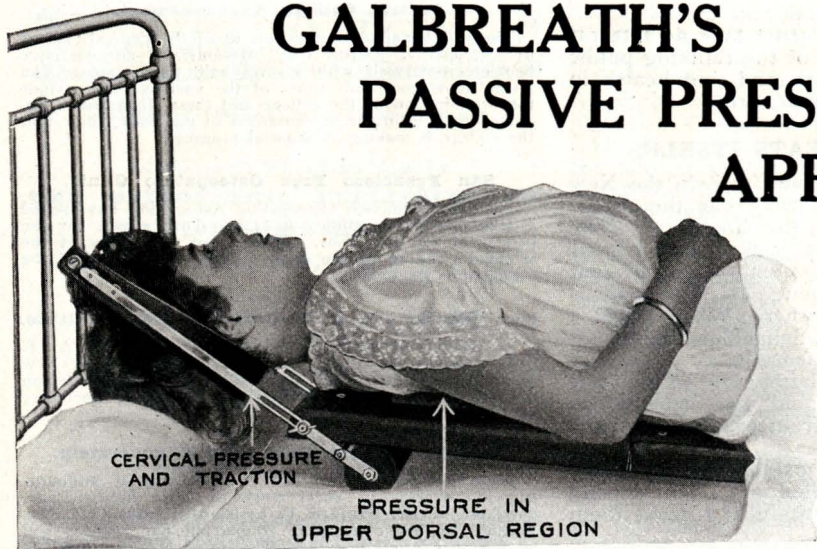
Littlejohn College Announcement.

The August number of the *Bulletin and Journal of Health of the Littlejohn College of Osteopathy*, Chicago, contains the regular annual catalogue and description of courses. An illustration of the new college building is shown and plans of the various floors are reproduced. Those interested in bringing the merits of the Littlejohn College to the attention of prospective students should procure copies of this August number as soon as possible.

Colorado Meeting a Success.

The semi-annual meeting of the Colorado Osteopathic Association held at Denver, July 27th, was pulled off in an entirely satisfactory manner. Dr. C. W. Johnson, of Des Moines, presented a paper on "Osteopathic Prophylaxis vs. Bacterial Invasion," which was thoroughly discussed, and Dr. Murray Graves, of Monroe, Louisiana, gave an interesting talk on "Osteopathic Experience." There were a number of clinic demonstrations. The social features included a dinner at the Auditorium Hotel and an excursion to Lakeside.

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Still College Annual.

The Still College of Osteopathy, Des Moines, Iowa, has issued its thirteenth annual catalogue and announcement, being for the season 1910-1911. It is a well printed book of some seventy pages and is very complete in its information concerning the equipment and work of the college, and also contains much interesting data concerning osteopathy in general. Our practitioners should cooperate with our colleges by getting catalogues into the hands of those who may possibly become students.

Proposed New Association for Minnesota.

At a meeting held at Mankato, July 9th, steps were taken to form a permanent organization of southern Minnesota osteopaths. Committees were appointed, on organizations, constitutions, by-laws and program. Action on the report of these committees will be taken at the next meeting, which will be held at Owatonna. A paper on "Infantile Paralysis" was presented by Dr. Arthur Taylor, of Northfield, and was fully discussed. In the evening a public lecture was given in the city library by Dr. Frank C. Farmer, of Chicago.

Louisiana State Board Meeting.

The Louisiana State Board of Osteopathy will meet October 14th, in New Orleans. All the practitioners who desire to be examined or to arrange reciprocity are asked to take notice. Louisiana will grant reciprocity to all states of equal grade, who will grant reciprocity to her. A great many have expressed their desire to locate in the South. Now is the time. You are all welcome. October is the best month of the year to start in. Sugar crop looks fine; rice crop good; prosperity, health, comfort, all await the wideawake, competent man or woman.—Henry Tete, D. O., Secretary.

Convention Note by The Western Osteopath.

Bunting was present. Bunting, who has sat in his office in Chicago and converted skeptics into patients from Oregon to Maine and from Florida to Texas, was here, and added much to the pleasure of others. Bunting, as the king among writers of field literature, has done more to advance osteopathic thought among intelligent laymen than all others who have engaged in this work combined, and he deserves our unqualified support. We hope that every reader of The Western Osteopath is a reader of The Osteopathic Physician and uses Osteopathic Health.—Western Osteopath for August.

Denver Association Meeting.

The Denver Osteopathic Association met Saturday evening, September 3d. Dr. M. A. Bolles reported a patient who had on his own responsibility been taking a fifty-nine day fast. Dr. Bolles had been following the case closely and with interest, making repeated tests. There was considerable discussion in regard to some plan of advertising which would be of osteopathy and not of any individual practitioner, the expense to be borne by all. A committee was appointed to formulate plans. Dr. Quintal read a paper on Pott's disease, Dr. Snare leading in the discussion which followed, the main theme of which was the advantages and disadvantages of a cast.—Cora G. Parmelee, D. O., Secretary.

Osteopathy Gets Publicity in Indiana.

Osteopathy is receiving considerable favorable publicity in the Anderson (Indiana) papers by reason of the success of Dr. Hanna with the case of Chester Crouse. The patient, a boy of thirteen years of age, had always been weak and had suffered from spinal trouble. His condition became so bad that he was obliged to give up school work, which was a source of great distress to him and to his parents. Dr. Hanna took over the case and in less than a year he had the boy so far improved that he was able to take up his school work and he is now steadily increasing in weight and in physical strength. We congratulate Dr. Hanna on his work and on the favorable publicity he has been able to secure for osteopathy.

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Chicago Osteopathic Association Meeting.

The September meeting of the Chicago Osteopathic Association was held September 8th at the Grand Pacific Hotel. Dr. Farmer and Dr. Proctor made reports on the A. O. A. Convention at San Francisco and preliminary arrangements for the convention in Chicago next year were discussed. The usual supper was served at the hotel.

Announcement From the Pacific College.

At a regular meeting of the Board of Directors of the Pacific College of Osteopathy, held September 1st, it was unanimously decided to withdraw the degree of Doctor of Medicine and Doctor of Osteopathy (M. D., D. O.). This action was taken because it is explained that conditions in other states are radically different from the conditions in California and that a step which may be beneficial to us may be harmful elsewhere. The second oldest osteopathic college in the world feels that it can not do anything prejudicial to osteopathy as a whole, even were such action immediately beneficial to the college.—C. A. Whiting, D. O., Chairman of the Faculty of the College.

Nebraska Osteopathic Convention.

The eleventh annual convention of the Nebraska Osteopathic Convention will be held at the Rome Hotel, Omaha, October 4th. The program in part is as follows: "Remarks and Statistics collected from Osteopathic Practitioners in Nebraska on Appendicitis," Dr. B. S. Peterson, Omaha; "Spinal Meningitis," Dr. M. E. Donohue, Omaha; "Exophthalmic Goiter," Dr. J. T. Young, Superior; "Scarlet Fever," Dr. M. J. Hoagland, Central City; "The Importance of Diet in Treatment of Nervous Diseases," Dr. E. M. Cramb, Lincoln; "The Relation of Spinal Lesions to the Eye," Dr. B. S. Peterson, Omaha; "Statistics on Diarrhea," Dr. I. F. Richardson, Fremont; "Statistics on Eye, Ear, Nose and Throat," Dr. C. A. Blanchard, Lincoln.

The Summer School at The Pacific College.

The Summer School at the Pacific College of Osteopathy was decidedly successful. Forty-one licensed physicians attended the whole or a part of the time. Of these, twenty-seven were graduates of other colleges and were mostly from other states. Work centered very largely around Gynecology and Obstetrics. The work on blood pressure also attracted a number of very earnest workers and the stereopticon lectures on Anatomy, Histology and Emeryology were well attended. A number of physicians did good work in Urinalysis and the analysis of stomach contents. A few untiring workers did some excellent work in human dissection. All of the work was absolutely free and the feeling of friendship that sprang up between the physicians attending this course and the college will not soon be effaced.

Dr. Nichols a Happy Man.

Dr. W. L. Nichols, successor to Dr. Fred E. Moore, at Enterprise, Oregon, is the proud father of twin boys presented by Mrs. Nichols on August 24th. The mother and babies are getting along finely and it is a very proud family. The boys have been named Otis Mark and Oliver Ridgeway. Dr. Nichols is one of the best known osteopaths in the northwest, being past vice-president of the Oregon State Association and the present Treasurer. He was one of the first two osteopaths to pass the examination before the Oregon Medical Board under the new law. He was married about a year and a half ago and since his location at Enterprise has been building up a very splendid practice. His many friends throughout the Northwest will be pleased to hear of the new arrivals in the family and of Dr. Nichols' continued success in his practice.

The Old Doctor's Dream.

We are in receipt of a sepia reproduction of a drawing by Dr. F. B. Millard, of Toronto, Canada, entitled "The Old Doctor's Dream." The picture shows the Old Doctor seated in his library while marginal drawings depict important events in his career; such as the swing incident; early experiences in Kansas; his connection with the army; the death of his children, which led him to take up the serious investigations which culminated in osteopathy; the conception of the idea of proper mechanical adjustment as the basis of good health; the first school of Osteopathy; the A. S. O. as it is today; and finally the vision of world-wide osteopathy. The picture is well drawn and presents in a very vivid manner the wonderful growth and development of the science of osteopathy. It is a tribute to the Old Doctor, too, that will be much appreciated by his many friends and admirers.

Osteopaths at Ann Arbor.

In times past it has been a great satisfaction to the M. D.s to scoff at the educational equipment of our practitioners. In the early days there was, no doubt, some ground for this criticism but, whatever may have been the conditions in the past, today our practitioners in the field and the students in our colleges show a commendable desire to keep abreast of the times in broad educational training as well as in special work. The Ann Arbor *Wolverine* for July 26th comments on the fact that there are eight osteopathic students taking the summer course in anatomy at Ann Arbor. Dr. Edgar D. Heist has already secured his D. O. degree, the others

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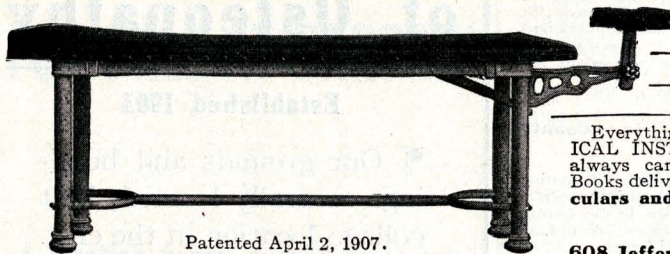
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are all under-graduates of the American School of Osteopathy. They are Arthur S. Hollis, Laura F. Sprague, Harold E. Illing, Mary H. McNab, Hubert J. Pocock, Catherine E. Hourite and Margaret O'Neil.

Dr. Akin Performs Lorenz Operation.

An operation of the Lorenz type for congenital dislocation of the hip was performed on little Esther Rossman by Dr. Otis F. Akin at the Good Samaritan Hospital yesterday morning. This is the second operation of the kind which has been performed in Portland during the week, the 4-year-old daughter of Professor James, principal of the public schools at Estacada, having been operated on for the same trouble Thursday at the same Hospital. This was also done by Dr. Akin, who in both instances was assisted by Dr. H. S. Leonard.—Portland (Ore.) Oregonian, September 3d.

Dr. Otis F. Akin was elected vice-president of the A. O. A. at the recent convention. He has developed unusual skill as a surgeon and has performed several successful Lorenz operations. He is very well known throughout the Northwest, and stands high in the confidence and esteem of our practitioners.

H. T. Root Tables Find Favor.

The patent treating table manufactured by H. T. Root, of Kirksville, Mo., has found considerable favor with the profession, the adjustable swing feature proving a great convenience. Dr. Samuel L. Scothorn, of Dallas, Texas, has found the table so satisfactory that he recommends it to the profession in an open letter as follows: "I take pleasure in commenting on the H. T. Root treating table. The swing is a very valuable feature for the operator, who by its use can save himself much

heavy work, and this is an advantage every practitioner should avail himself of and the sooner the better.

"As to the durability of the table I think it could not be improved, as in every possible way it is constructed to stand the wear and tear of use."—Samuel L. Scothorn, D. O., Dallas, Texas.

Drs. Noyes and Goodspeed See Sights in Europe.

Dr. Mary E. Noyes and myself had a lovely trip across the ocean. We landed in Glasgow, July 8th, but as we only had time to get lunch there we could not call on our osteopathic friends. When we reached Edinburgh, found Dr. Hudson had sailed for U. S. A.

In London we called on Dr. Watson and found her enjoying a good practice.

While in London we visited the oldest hospital, St. Bartholomew's. It is about eight hundred years old. We enjoyed Scotland very much, especially Loch Lomond, the Trossaks and Melrose Abbey.

We are now enjoying Switzerland. The Alps are certainly fine and at Interlachen we were lucky enough to see the Alpine glow of sunset on Jungfrau, which they said was the finest seen in two years.

We have had beautiful weather most of the time. Tomorrow we leave for Munich and then to Oberammergau to see the Passion Play on Wednesday, and from there through Italy and France. We expect to sail for home August 20th.—Almeda J. Goodspeed, D. O., July 24th.

The X-Ray Claims Another Victim.

Doctor Mihran K. Kassabian, author of works on Electricity and Roentgen Rays, and one of the leading authorities in this country on these subjects, died re-

cently a martyr to the science he studied, from the effects of X-ray burns. He continued his labors with the agent that caused his death up to the time that he collapsed.

The wide publicity given to this fact will no doubt deter many patients from submitting themselves to X-ray examinations. It should, however, be published equally broadly that it is the result of the labors and dangers undertaken by such men as Dr. Kassabian that has made the use of X-rays as safe as now it is.

Even though finally the therapeutic value of the X-ray prove to be not so great as hoped, yet the world needs to know what not to do, as well as what to do; and so such martyrs and their work become a part of the heritage of all professions.

California State Meeting.

The sixth annual meeting of the Osteopathic Association of the State of California was held in the St. Francis Hotel August 1st. Only one day was devoted to the session as the A. O. A. was to meet on the following day. The routine business demanded the first attention. The officers for the year are: President, Dr. D. C. Farnham, San Francisco; first vice president, Dr. Louise C. Heilbron, San Diego; second vice president, Dr. Lillian M. Whiting, South Pasadena; treasurer, Dr. Lester R. Daniels, Sacramento; secretary, Dr. Effie E. York, San Francisco; trustees, Dr. W. W. Vanderburgh, San Francisco; Dr. Dain L. Tasker, Los Angeles; Dr. J. Leroy Near, Berkeley; Dr. R. W. Bowling, Los Angeles; Dr. J. C. Rule, Stockton. After the conclusion of the business session the rest of the afternoon was given up to the reduction of congenital hip dislocation on a three-year-old child by Dr. Harry W. Forbes, of Los Angeles, which was followed with great interest by the state and visiting practitioners.—*Effie E. York, D. O., Secretary.*

Sight Restored By a Fall.

When ten years of age, Peter Mayard, of Mercerville, N. J., was struck with a baseball in the right eye and the injury resulted in total blindness. Notwithstanding this affliction, he completed his education and became an expert pianist and was happily married. Recently, when hurrying for a doctor on account of the sickness of Mrs. Mayard, he stumbled and fell ten feet over an embankment and was rendered unconscious. Upon recovering he was informed by his friends that his wife had presented him with a ten pound baby girl. A few minutes later he surprised his friends by joyfully exclaiming that he could see as well as in his boyhood days. Mrs. Mayard is a beautiful woman, but Mayard had never seen her. When presented after the recovery of his sight he was amazed at her appearance, saying that she was totally different from what he had imagined her to be. He was greatly delighted, however, saying that he didn't know he had married the prettiest girl in the country. Old school physicians expressed great surprise at the result of the fall, but to osteopaths the incident, while interesting, would not appear so extraordinary.

Osteopaths Demand Admission to County Hospital.

Dr. C. A. Whiting, of the Pacific College of Osteopathy, Los Angeles, California, is leading a fight of the osteopaths of that city for the right to admission to the county hospital. Under the rules now in effect, they are not allowed to treat patients in county institutions.

Dr. C. H. Whitman, superintendent of the county hospital, says that he will follow the rules and if the board makes the necessary change no objection will be made to osteopaths attending patients in the hospital. Personally, however, he is opposed to the rules being changed.

Dr. Whiting is basing his present claim for the admission of osteopaths on the case of a Mrs. Evans, who was admitted to the hospital six months ago and whose case has been pronounced a hopeless one. She has repeatedly requested osteopathic treatment, but no osteopath has been permitted to see her. The controversy has been given considerable space in the local papers and the influence exerted at the National Convention in San Francisco it is possible that sufficient public sentiment can be worked up to compel the board to grant our practitioners their rights.

North Carolina Mid-Summer Meeting.

The mid-summer meeting of the North Carolina Osteopathic Society was held at Wrightsville Beach, July 9th. The attendance was small owing to this being the first mid-summer meeting. From now on we will have two meetings a year; one in July and one in November or December. The especial feature of this meeting was the address of Dr. Geo. M. Laughlin and also his clinical demonstrations. Dr. Laughlin's subject was, "The Present Status of Osteopathy." He brought out many points to show that the Osteopath should feel that his system when properly applied is all that could be expected at this time. It is safe to say that Dr. Laughlin's convincing argument in favor of our Osteopathic Colleges has kept at least three N. C. D. O.s from studying medicine. These men will in all probability do post graduate work in one of the Osteopathic schools. According to Dr. Laughlin, an additional year or two years' work will fit the two year graduate for general practice as well as four years spent in obtaining a medical degree. The next meeting, our regular annual meeting. The exact time and place to be announced later.—*A. H. Zealy, D. O., Secretary.*

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Miss Felicie Lyne Returns to America.

Miss Felicie Lyne, daughter of Dr. T. S. Lyne, of Kansas City, continues to get very favorable press notices on her work as a singer. After an absence of three years abroad studying, Miss Lyne returned to

America August 15th, and is now preparing for her appearance this fall under the management of Oscar Hammerstein. It is said that Miss Lyne has one of the greatest coloratura soprano voices of musical history, and the length of her trill is rivaled only by Melba. Mme. Marchesi, of Paris, is quoted as saying of her:

"She is one of the best educated American girls who ever came to me. Her French and Italian diction is perfect. She is a born actress. Her voice is beautiful and her work exquisite." On account of her prominent osteopathic connection the profession will be more than interested to note the future success of Miss Lyne.

Montana Osteopaths Have Big Convention.

The tenth annual convention of the Montana Osteopathic Association was held at Billings July 26th and 27th. There was a large attendance. Dr. George Still, of Kirksville, was a guest of honor and delivered two lectures and clinic demonstration. Other papers on the program were: "Our Aim: What is it?" Dr. W. C. Dawes, of Bozeman; "Meningitis," Dr. C. E. Dove, of Glendive; "Acute Diseases," Dr. Asa Willard, of Missoula; "Osteopathy in Pediatrics," Dr. Eva M. Hunter, of Livingston; "Toxicity of the Blood in the Neuroses," Dr. L. K. Cramb, of Butte; "Our Motive, or What Shall We Do for Osteopathy," Dr. E. M. Carey, of Laurel. Officers were elected as follows: President, Dr. C. E. Dove, of Glendive; vice-president, Dr. John J. Rieger, of Billings; secretary, Dr. J. Louise Smith, of Missoula; treasurer, Dr. Daisy Rieger, of Billings; trustees, Dr. L. K. Cramb, of Butte, and Dr. Asa Willard, of Missoula. A banquet was held in the evening at which Dr. Willard acted as toastmaster. Toasts responded to were: "Who Killed Pat Riley?" Dr. Still; "Osteopathy," Dr. W. C. Dawes; "Our Hosts," Dr. C. E. Dove, Glendive; "Solar System," Dr. Daisy Rieger, Billings; "Why Is an Oyster; If So, How and Why," Dr. Campbell Black, Toronto, Canada; "To Adam and Eve," Dr. Wellington Dawes, Dillon.

Ontario Association Meeting.

The tenth annual meeting of the Ontario Association of Osteopathy was held in the Temple building, Toronto, September 5th. About fifty osteopaths, including several visitors, were present and all enjoyed the excellent program presented. "Auto-intoxication as a Cause in Foot Disease and Deformities," Dr. Chas. Hazzard, New York City; "Lesion Charts: Costal Lesion Possibilities, Methods of Occurrence," Dr. F. P. Millard, Toronto; "Reduction of Lesions Described Above" (demonstrations), Drs. Henderson and J. S. Bach, Toronto; "Lesions Causing Diseases of the Stomach, and Their Correction," Dr. E. J. Grey, St. Thomas; "Diseases of the Heart Considered Osteopathically," Dr. A. Gordon Walsley, Peterborough; "Indications and Contra-indications of Use of Enemata," Dr. Edgar D. Heist, Berlin; "The Use of Supports in Treating Curvature of Spine," Dr. A. B. Floyd, Buffalo, N. Y. Several resolutions were adopted, among them being one of sympathy to Dr. A. T. Still in his recent bereavement, and one opposed to the creation of a national board of health. Officers elected for the year were: President, Dr. R. B. Henderson, Toronto; vice-president, Dr. J. S. Bach, Toronto; secretary, Dr. E. D. Heist, Berlin; assistant-secretary, Dr. F. P. Millard, Toronto; treasurer, Dr. J. N. MacRae, Galt; trustees, Dr. S. B. Detwiler, Guelph; Dr. E. J. Gray, St. Thomas; Dr. A. G. Walsley, Peterborough. It was decided to present a bill at the coming session of the legislature and we are all hopeful of getting it passed. The semi-annual meeting of the association will be held in St. Catharines the Monday following Easter.—*A. G. Walsley, D. O.*

Osteopathy at Hot Springs, Arkansas.

Notwithstanding the efforts of the local Federal Medical Board, osteopathy is still holding its head high at Hot Springs, Ark. Dr. A. W. Berrow, of that city, has been made the victim of a malicious attempt to drive him out of practice by dropping his name from the list of registered physicians authorized to prescribe the waters on a charge of violating the Federal regulation against "drumming." Dr. Berrow stuck to his post and recently won his case at Washington as the following letter shows:

Dr. A. W. Berrow, Hot Springs, Ark. Sir: I am in receipt of your letter of July 2d, 1910, requesting advice as to the present status of your application pending before this department for the restoration of your name to the list of registered physicians authorized to prescribe the waters at Hot Springs, Ark., and in reply I have to state that under date of the sixth instant, the Superintendent of the Hot Springs Reservation was advised that the Department did not consider the evidence against you sufficient to sustain the charge of drumming, and he was instructed to cause the Federal Registration Board to restore your name to the registered list.—*Clement S. Ucker, Chief Clerk.*

This vindicates Dr. Berrow and recedes charges of the local Federal Medical Board at Hot Springs, who have repeatedly tried to injure the Doctor's practice and the profession of Osteopathy in that city by dropping his name from the list of registered physicians authorized to prescribe the waters at Hot Springs, Ark.

In view of the government regulation against solicitation, it is very important that osteopaths sending patients to Hot Springs refer them to a D. O. by a card of introduction. Dr. Berrow informs us that the M. D.s outnumber the D. O.s about seventy to one, so the chances of a patient getting into the hands of an osteopath unless he has a letter of introduction, are rather remote.



The Osteopathic Hand-Book

We take pleasure in presenting in *Osteopathic Health* for October the "Osteopathic Hand Book", something in the way of literature that the profession has long needed. As its name indicates, it is a concise compilation of osteopathic data, but it is not, as some might suppose, simply a collection of dry statistics. It is written in such a style and presented in such a form as to make easy, entertaining reading. It takes cognizance of osteopathy both as an institution and a science, and is an authoritative statement of the origin, growth, progress and present legal status of osteopathy; together with the recapitulation of its societies, schools and publications. It gives a broad, general survey of the whole subject in the briefest possible space.

It is a brochure that would be much appreciated by any one newly awakened to a desire to know something about osteopathy. It will prove invaluable for distribution in legislative campaigns, and for general educational purposes it cannot be excelled, as it presents so strongly the claims of osteopathy to legitimate recognition and investigation and trial, and shows so clearly the high prestige and standing it has already established, that any fair-minded reader of average mentality cannot fail to be impressed and won over, at least to a friendly attitude toward our science.

One of the big obstacles in the way of the advance of osteopathy is the fact that it is so little understood and the institutions it has organized are so little known. The progress the science has made in numbers and influence; the remarkable cures it has effected; the legal recognition it has won; while really wonderful and eminently satisfactory to those informed, is a subject upon which the public, as a whole, is still grievously ignorant. This little "Osteopathic Hand Book," if as generously used by our practitioners as it deserves to be and as we hope it will be, will do much to remedy the situation. It contains the kind of information we need to have before the public constantly and always conveniently available for reference.

We bespeak for the brochure liberal and persistent circulation. Three or four hundred thousand could be distributed in this country to good advantage. If every active practitioner in the profession would distribute even one hundred copies we would create a very decided influence and start more people simultaneously talking about and investigating osteopathy than we have ever known in its history. The fruits of the effort are decidedly well worth working for. Will you be one to help?

As an individual practice builder the "Osteopathic Hand Book" is first-class.

As the opening gun for a winter publicity campaign it has more force and power than anything we can suggest.

Specimen copies are now ready for mailing and will be sent upon request. Orders for any quantity filled promptly.

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A Manual of Osteopathic Gynecology

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SECOND EDITION

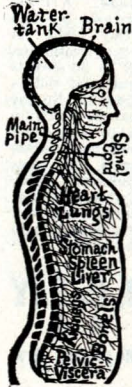
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Pleased Patrons Praise Osteopathic Health

The July *Osteopathic Health* arrived O. K. and they are O. K.—Dr. L. A. Howes, Minneapolis, Kan. July 10th.

I want to compliment you on the physical appearance of the July *Osteopathic Health*. It is a beauty. This is the kind of cover color to have.—Dr. Ralph Kendrick Smith, Boston, Mass. June 28.

I read the July issue of *Osteopathic Health* and like it very much indeed.—Dr. R. D. Healey, Salina, Kan. July 5th.

I received the July *Osteopathic Health* and like it very much. I find that these plain talks on diseased conditions bring about many inquiries from my patients. Accept my congratulations on the union of two good publications. Success should attend your efforts.—Dr. E. L. Harris, Marietta, Ga. July 12th.

That June number of *Osteopathic Health* was a dandy. The lity seem to all think it was the right kind of "stuff."—Dr. H. F. Ludwig, Parker, S. Dak. June 27th.

Please send me a supply of August *Osteopathic Health* quick. Its the best I ever saw! Congratulations!—Dr. Ethel S. Pearson, Earlville, Ill. July 28.

The July issue of *Osteopathic Health* is just fine.—Dr. F. J. Lynch, San Luis Obispo, Cal. July 18th.

Please send me one hundred copies of the September *Osteopathic Health* and forward contract for one hundred copies a month for one year. I simply can't keep house without *Osteopathic Health*.—Dr. J. O. Strother, Winfield, Kan.

We have been using four hundred copies of *Osteopathic Health* monthly for a number of years. We find that it has paid us very well; in fact, we do not carry cards in any journals or local newspapers, but put that money into *Osteopathic Health*, which pays us a good dividend on the investment.—Drs. Wendell and Magill, Peoria, Ill.

I find that my patients all like *Osteopathic Health* and I often have requests for extra copies to send to friends. I feel confident that *Osteopathic Health* does more good for the cause of Osteopathy than we are apt to imagine.—Dr. Austin Neame, Red Bank, N. J. September 11th.

Since my location in Denver eight years ago I have used a great many of *Osteopathic Healths* and I believe this is one of the reasons why I have never lacked for practice.—Dr. Chas. C. Reid, Denver, Colo. August 24th.

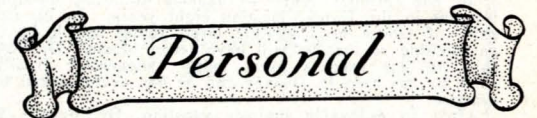
For Special Distribution

We have a limited supply of former editions of *Osteopathic Health* that we will sell in assorted numbers at \$2 a hundred, delivered; assortment of five hundred copies, \$8 delivered. The assortments will be made to contain some copies of all the numbers we have on hand. Remittances must accompany order. These magazines we offer include some of the best osteopathic educational articles ever published and are worth many times what we ask for them. Samples will be mailed on request.

Homeopaths and Allopaths.

If on doctors you should be a caller,
You will find there's not much in a name;
Though the dose of one is much smaller,
The size of their bills is the same.

—August Lippincott's.



Dr. Frank Polometer of Kirksville, Mo., had the misfortune to lose his residence by fire. He is now rebuilding.

Dr. M. E. Church, of Calgary, Canada, has now associated with him, Dr. N. L. Sage, formerly of Detroit, and Dr. Helen D. Walker. The firm is known as Church, Sage and Walker. This increase of practitioners in the city seems to indicate that osteopathy is getting in favor in the great Northwest.

I have changed my address from 330 to 514 Mason building. I found it necessary to have more and larger treatment rooms, consequently the change. The convention at San Francisco was all right. Rah! for Chicago 1911!—L. Ludlow Haight, D. O., Los Angeles, Cal.

Dr. W. E. Davis, who was formerly located eight years at Paris, Ill., and who lately has been taking a post graduate course at the Los Angeles College of Osteopathy, is now located at Beaumont, Texas, with his brother, Dr. W. D. Davis. He passed the Texas State Board examination at the June meeting and expressed himself well satisfied with the courtesies shown him and the fairness with which the examination was conducted.

Dr. W. C. Dawes, of Bozeman, Mont., is back in charge of his practice after a vacation of about two months which he spent in various cities east. While on his vacation he married Miss Nelle Park of Bluffton, Ind., and the honeymoon included a trip to Niagara Falls.

Dr. L. A. Bumstead of Delaware, Ohio, has recently returned from a five months' trip in Europe. Most of

THE OSTEOPATHIC PHYSICIAN

the time was spent in hospitals in Vienna and Munich. Dr. Bumstead says that he believes he can give some valuable pointers to the other Osteopaths who may be contemplating a similar trip, and that he will be very glad to correspond with any such, who desire to avail themselves of the benefit of his experience.

Dr. Gilman A. Wheeler, of Boston, Mass., has been away from his office since the middle of July enjoying a vacation and rest which was much needed. He is now back in his office prepared to handle a heavy practice.

Dr. Edith J. Lewis, A. S. O. June graduate, has located at Hamilton, Ont., her office being at 37 Wellington street, south.

Dr. Carrie A. Bennett, formerly of Joliet, Ill., has sold her practice in that city and will move to 4065 Eighteenth avenue, Denver, Colo., where she will spend a short time preparatory to selecting a location on the Pacific coast.

Dr. Ida M. Rogers, formerly of Delta, Colo., has sold her practice at that place to Dr. Grace Parker and has removed to Mound City, Mo., where she will practice temporarily at least. Her husband, who is engaged in the contract business, has a large drainage contract in the vicinity.

Dr. Grace Parker, formerly of Greenleaf, Kan., has located in Delta, Colo., having purchased the practice of Dr. Ida M. Rogers.

Dr. H. S. Loving, formerly in partnership with Dr. Willden P. Snare, at 508 Temple court, Denver, Colo., has secured very commodious offices at 423-424 Commonwealth building, Fifth and Stout streets.

Dr. L. Curtis Turner and Mrs. Turner, of Boston, Mass., have been spending a two months' vacation automobiling through New England. Dr. Turner is now back in his office ready to plunge into fall and winter work.

Dr. Wm. H. Bruce, formerly of Houston, Texas, is spending a vacation at Colorado Springs, Denver and other western points.

Dr. J. Corwin Howell, with offices at Mint Arcade building, Philadelphia, and at Vineland, Pa., is now spending most of his time at Vineland, as his work in connection with his sanitarium there keeps him very busy.

Dr. K. L. Seaman, of Fort Wayne, Ind., is receiving favorable press notices on his successful treatment of a severe typhoid fever case. The patient was the four-year-old daughter of A. T. Brown, living near Fort Wayne. An old school physician was originally called and he pronounced it a very severe case, the fever reaching 104 degrees, with delirium and diarrhoea with bloating of the bowels. He said there was little hope of recovery. He was dismissed and Dr. Seaman was called in and at once commenced treatment. After the second treatment he was able to reduce fever and check the diarrhoea, and finally brought the case successfully through.

The local Superior, Neb., papers are saying some very nice things about Dr. J. T. Young on the occasion of his removal from that city to Fremont. It is quite evident that Mr. Young had established for himself a high reputation in the community and they were very sorry to lose him.

Dr. David Mills, of Alpena, Mich., has sold his practice to Dr. A. B. Carter, now of Flint, who will take possession of the practice October 1st. Dr. Mills goes to Ann Arbor to do some special work at the University of Michigan.

Dr. A. B. Carter, of Flint, Mich., has purchased the practice of Dr. David Mills, at Alpena, Mich., and will take charge October 1st.

We are in receipt of a postal card from Dr. Kendall A. Achorn dated London, England, in which he states he is leaving for Paris and an automobile trip through the chateau country. He expects to be back here early in October.

Dr. Chas. C. Reid, of Denver, Colo., has removed from 308 Temple court to 535-538 Majestic building. He was in the former location eight years. In his new suite of offices he has four large rooms which he is partitioning so that he will have seven rooms. Dr. Reid says he has used a great many Osteopathic Healths since he has been in Denver and he has never lacked for practice.

After an enjoyable summer vacation, Dr. George H. Carpenter and Dr. Fannie Carpenter, of Chicago, are back in their offices taking care of practice.

Dr. Homer E. Bowers, of Newburg, Ore., has been doing post graduate work at the Los Angeles College of Osteopathy.

Dr. Mable Akin and Dr. Gertrude Gates, of Portland, Ore., made a trip to Honolulu after the A. O. A. convention.

Dr. Chas. Homer Woodruff, of Mexico City, Mexico, has won for himself a very high reputation in the city, and has been appointed house physician to the leading hotels there.

Dr. Cyrus N. Ray, who was recently refused a license by the Texas State Board, has been successful in the court to compel the board to issue a license to him. He showed, conclusively, that he had in reality successfully passed the examination, but that his papers had been improperly marked. The board backed down completely and issued the license without further protest. Dr. Ray is now temporarily looking after the practice of his brother in Fort Worth, Texas.

Drs. George W. and Chloe C. Riley have removed to the Hotel le Marquis, 14 East Thirty-first street, New York City. They have a beautiful suite of offices and their patients are congratulating them on the change. The necessity of moving just when they did prevented Drs. Riley from attending the National Convention at San Francisco.

Dr. Harry Montis Vastine, of Harrisburg, Pa., sailed August 2d for Europe, via the Noordham for Boulogne. He will tour France, Switzerland, Germany, Holland and

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THE OCTOBER NUMBER
OF THE
OSTEOPATHIC HEALTH
WILL BE KNOWN AS THE
Osteopathic Handbook

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Belgium, incidentally visiting Oberammergau. He will return to New York City from Bremen on the North German Lloyd Steam Ship Barbarossa. This European trip, which was planned some time ago, prevented Dr. Vastine from attending the A. O. A. convention, but he sent a message through the editor voicing his firm allegiance to the A. T. Still pure brand of osteopathy and to the independent examining board idea.

Dr. L. A. Howes, of Minneapolis, Kansas, was recently called to the bedside of his mother on account of her very serious sickness. He had to stay three weeks with her, but was successful in overcoming her trouble. This enforced absence from his office and the accumulation of work ahead of him prevented Dr. Howes from attending the A. O. A. Convention.

Dr. W. L. Nichols, formerly of Portland, Oregon, and treasurer of the Oregon Osteopathic Association, has taken charge of the practice established at Enterprise, Oregon, by Dr. F. E. Moore, and which he recently gave up so as to be able to do some special post-graduate work. Dr. Nichols has been very favorably received in the community and his prospects for success are bright.

Dr. Charles F. Banker, of Kingston, N. Y., has closed his office during the month of August and is taking a vacation during the hot weather. He expects to reopen his office the first of September.

Dr. and Mrs. J. A. Boyles, of "The Art Royal," Baltimore, Md., left the latter part of July for Eaglesmere Park, Pa., where they are enjoying a month's vacation. Dr. Boyles will re-open his office early in September.

Dr. Leon B. Hawes, of Adrian, Mich., has removed his offices from the Lenawee County Savings Bank Building to the National Bank of Commerce Building, a new structure having the advantage of elevator service, it being the first building in the city to have this modern equipment. We congratulate Dr. Hawes on securing offices in this up-to-date building. Osteopaths everywhere should endeavor to have their offices present the best possible appearance.

Dr. S. R. Love, of DeLand, Florida, and Thousand Island Park, New York, has formed a partnership with Dr. Grace Gould, a graduate of the Philadelphia College of Osteopathy. Dr. Gould will have charge of the DeLand office during the summer months, while Dr. Love is at Thousand Island Park. Dr. Love will relieve her in the fall, while she has her vacation and then during the tourist season, from December to June, they will practice together.

Dr. J. R. Moseley, of St. Augustine, Florida, is spending his vacation at Calhoun, Kentucky.

Dr. James O. Saylor, of West Chicago, Illinois, has been appointed Health Commissioner for the city of Geneva. The M. D.'s put up a great deal of opposition to his appointment, but he won out just the same.

Dr. Orren Ernest Smith, of Indianapolis, was married July 25th at Decatur, Indiana, to Miss Nellie Jane Schrock of that city. After the ceremony the bride and groom left for a tour of the Pacific coast to return via Vancouver early in September. While in San Francisco Dr. Smith attended the convention of the American Osteopathic Association.

Dr. Albertina M. Gross, A. S. O. graduate, has opened an office in the Woodruff building, Joliet, Illinois. Dr. Gross is very well known in Joliet, it being her home town and her prospects for success in practice are very encouraging.

Dr. G. P. Jones, of Watertown, has removed from the Granite block to the second floor of the Watertown Sanitarium and Hospital where he has one of the finest appointed offices in the city.

Dr. J. T. Young, formerly of Superior, Nebraska, has removed to Fremont, Nebraska, and has formed a partnership with Dr. I. F. Richardson of that place. Both men are successful and skilful practitioners and the partnership should prove a strong combination.

Dr. C. F. Christensen, Still College graduate, has purchased the practice of Dr. C. C. Bradbury, of Brooking, S. D. His wife, who is also a graduate osteopath, will assist him in handling the practice. Dr. Bradbury has not yet decided on a new location.

Dr. M. S. Mendenhall, A. S. O. graduate, has located at Mitchell, South Dakota, with offices in the Western National Bank Building. Dr. Mendenhall is already known in the town having some relatives there.

Dr. W. H. McCoach, of Breckenridge, Mo., has opened a branch office at Hamilton, Missouri, with offices in the Martin Block.

Dr. J. A. Kerr, of Wooster, Ohio, has opened a branch office at Ashland, Ohio, where he spends Mondays, Wednesdays and Fridays: It is the intention of Dr. Kerr later on to devote his entire time to the Ashland practice.

Dr. R. T. Tandy, A. S. O. graduate, has selected Seneca, Kansas, as his location for practice.

Dr. Bruce Hayden, A. S. O. graduate, has opened an office at Battle Creek, Michigan.

Dr. L. R. Trowbridge, of Polo, Illinois, has taken charge of the practice formerly belonging to Dr. E. M. Browne, of Dixon, Illinois.

Dr. D. V. Moore, A. S. O. graduate, has located at Eldora, Iowa, with a branch office at New Providence.

Dr. Harry C. Kirkbride, of Findlay, Ohio, and Dr. Wm. R. Westfall, of Fostoria, Ohio, both recent A. S. O. graduates, were amongst those who successfully passed the recent State Board examination at Columbus and they have duly received their licenses permitting them to practice in Ohio.

Dr. Ada Achorn, of Boston, spent a vacation at the seashore during part of July and August.

Dr. Kendall Achorn, of Boston, sailed about the middle of August on the Kronprinzessin Cecile for a few weeks automobile trip through France and England. He will return on the Deutschland about the middle of September.

Dr. E. J. Carson, of Fayetteville, N. C., has been appointed a member of the North Carolina Osteopathic Board of Examinations and Registrations.

Dr. T. J. Watson, of New York City, who during last winter was suffering from an attack of diabetes, which, for a time, seemed to make it necessary for him to retire from his practice indefinitely, has now recovered his complete good health and announces that he expects to stay at his office with the coming fall and winter.

Dr. Maud F. Barger, of Westfield, New Jersey, has been maintaining a summer office at 324 Prospect street, having closed her office at the Westfield Inn temporarily.

Dr. Mina Westhold, graduate of the Pacific College of Osteopathy, Los Angeles, has located at Quincy, Ill., having offices at 435 South Eighth street.

Dr. W. A. Clore, recent graduate of the American School of Osteopathy, has located at Pontiac, Ill.

Dr. Alice Sheppard Kelley, of St. Paul, who is a member of the St. Paul Health League, left Fort Snelling August 3rd for a two hundred mile walk to Curry, Minn., the home of her girlhood. Dr. Kelley had a special costume for the tramp and carried a small grip and a thirty-eight caliber revolver. She expects to make the trip in ten days, averaging ten miles a day.

Dr. M. C. Hardin, of Atlanta, Ga., is at Vienna. He writes that he is taking a course with Lorenz and studying pathology and diagnosis. He is enthusiastic about the opportunities for medical study in the city.

Dr. H. C. Johnson, of Quincy, Illinois, was recently called to Decatur on account of the death of his father, G. C. Johnson. He was sixty-eight years of age and is survived by a widow and three children.

Dr. M. J. Grieves, of Peoria, has opened a branch office at Tremont and will visit that place on Friday of each week.

Dr. M. B. Harris, of the firm of Harris & Harris, Dallas, Texas, has removed to Amarillo, Texas, on account of the health of Mrs. Harris.

Dr. Paul M. Peck, of San Antonio, is a sportsman of renown. He recently achieved fame by catching a tarpon six feet in length, weighing 140 pounds, on a 9 strand line, capable of standing a strain of 18 pounds. It required an hour and a half to land the fish. The skill and dexterity exhibited in landing the fish on such a light tackle earned Dr. Peck a gold button from the Tarpon fishing club.

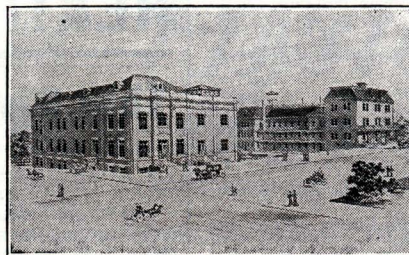
Dr. F. N. Oium, of Oshkosh, has proudly announced the arrival of an osteopathic girl weighing 8¼ pounds, August 8. He says that mother and baby are doing fine and that "Dad" is just recovering.

Dr. William Effort, of Sheboygan, Wisconsin, expects to establish an osteopathic sanitarium. If the proposition goes through the institution will be very completely equipped and will have facilities for baths and water treatments. It will accommodate about twenty patients.

Dr. Lola L. Hays, of Moline, Illinois, has returned home after her long trip around the world. She says that the trip was delightful in every way and that she was much benefited by it. She is now located at 410 Sixteenth street, and has taken up her regular practice.

Dr. J. H. Long, of Lancaster, Ohio, who has been taking a year's post graduate work at Yale, has returned to Lancaster. He expects to resume practice this fall and winter.

Next class will begin
September 12, 1910



Write for Catalogue,
"Journal of Osteopathy,"
or any information.

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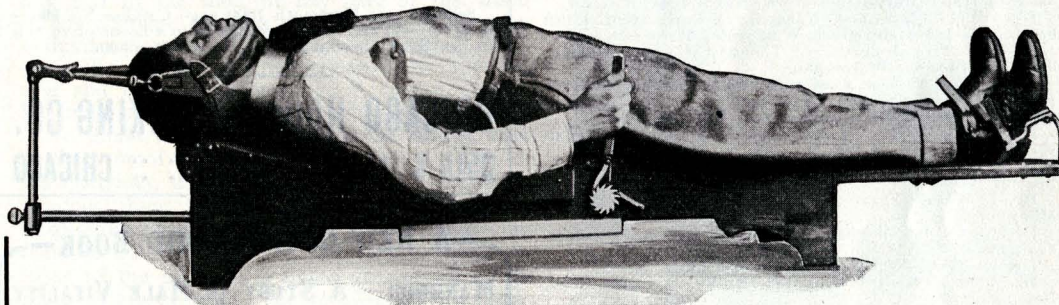
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Locations and Removals

Dr. George-Percy Long, at The Renaissance, 488 Nostrand avenue, at Hancock street, Brooklyn, N. Y.

Dr. Wm. R. Stryker, from Bozeman to Missoula, Mont.

Dr. Edith J. Lewis, at 37 Wellington street, Hamilton, Ont.

Dr. Carrie A. Bennett, from Joliet, Ill., to 4065 Eighteenth avenue, Denver, Colo.

Dr. Ada E. Morrell, from Glidden building, Lowell, to Lewiston, Maine.

Dr. Ida M. Rogers, from Delta, Colo., to Mound City, Mo.

Dr. Grace Parker, at Delta, Colo.

Dr. F. W. Wetmore, from 375 Carpenter street, Providence, to 215 Oak Hall building, Pawtucket, R. I.

Dr. L. Ludlow Haight, from 330 Mason building, to 513 Mason building, Los Angeles, Cal.

Dr. W. E. Davis, from Los Angeles, Cal., to Beaumont, Texas.

Dr. David Mills, from Alpena, to University of Michigan, Ann Arbor, Mich.

Dr. A. B. Carter, from Flint to Alpena, Mich.

Dr. Chas. C. Reid, from 308 Temple court to 535-538 Majestic building, corner Sixteenth street and Broadway, Denver, Colo.

Dr. Geo. A. Brewster, from 1261 Michigan street to 24 Laurel street, Buffalo, New York.

Dr. Frank L. Martin, from 992 Page street to 1630 Devisadero street, San Francisco, Cal.

Dr. S. G. Mosher, from 330½ South Spring street to Rooms 714-716 Grant building, 335 South Broadway, Los Angeles, Cal.

Dr. F. K. James, from 1408 Washington boulevard to 4463 Woodlawn avenue, Chicago, Ill.

Dr. F. E. Barnard, from Scottsbluff to Denver, Colo.

Dr. C. F. Christensen, from Des Moines, Iowa, to Brookings, S. D.

Dr. W. A. Clore, at Pontiac, Ill.

Dr. Mina Westhold, at 435 South Eighth street, Quincy, Ill.

Dr. A. C. Cluff, at Albion, Mich.

Dr. Leon B. Hawes, from Lenawee County Savings Bank building to the National Bank of Commerce building, Adrian, Mich.

Drs. Geo. W. and Chloe C. Riley, from 43 West

Thirty-second street to The Hotel Le Marquis, 13 East Thirty-first street, New York City, N. Y.

Dr. W. L. Nichols, from 614 Marquam building, Portland, to Enterprise, Ore.

Dr. D. V. Moore, at Eldora, Iowa.

Dr. L. R. Trowbridge, at Countryman building, Dixon, Ill.

Dr. Bruce Hayden, at Battle Creek, Mich.

Dr. R. T. Tandy, at Seneca, Kan.

Dr. M. S. Mendenhall, at Western National Bank building, Mitchell, S. D.

Dr. G. P. Jones, from the Granite block to Watertown Sanitarium and Hospital, Watertown, S. D.

Dr. Albertina M. Gross, at Woodruff building, Joliet, Ill.

Dr. W. J. Tetz, from 1426 North Fulton avenue to 411 East North avenue, Baltimore, Md.

Dr. Frank A. Lovell, at Suite 418 Trust building, Franklin, Pa.

Dr. Leonard V. Strong, from 143 Seventh avenue to 25 Seventh avenue, Brooklyn, N. Y.

Dr. O. E. Pinneo, from 536 North St. Louis street, Los Angeles, to Huntington Park, Cal.

Dr. Louis Fehchtig, from 143 Shelton avenue to 108 Herriman avenue, Jamaica, N. Y.

Dr. Lamont H. Fisher, from 1024 Halsey street to 22 Covert street, Brooklyn, N. Y.

Dr. Millie Rhodes, from 1024 Halsey street to 22 Covert street, Brooklyn, N. Y.

Dr. Irving Whalley, from numbers 1214-1215-1216 Land Title building to numbers 914-915-916 Land Title building, Philadelphia, Pa.

Drs. O. R. and Nettie Streight, from Sidney, Ohio, to 326 South Second street, Hamilton, Ohio.

Dr. Geo. H. Merkey, at Suites 1909-1912 The Hotel Martiniqne, 56 West Thirty-third street, New York City.

Drs. P. S. and Lottie M. Anderson, from Cedar Rapids to Fullerton, Neb.

Drs. Edward B. and Ida J. Hart, from Pittsburg, Pa., to 369 Washington avenue, Brooklyn, N. Y.

Dr. Peter J. Wright, from 94 West street to 33 East River street, Hyde Park, Mass.

Dr. Cecil R. Rogers, from 275 Central Park West to 47 West Thirty-fourth st, New York City.

Dr. W. H. Sexton, from 340 Mint Arcade, Philadelphia, to Broadway and Arch streets, Milton, Pa.

Dr. L. D. Smith, from Aurora to 312 East Broadway, Centralia, Ill.

Dr. U. S. G. Bowersox, from 247 Main street to Rister building, corner Fourth and Main, Longmont, Colo.

Dr. W. Banks Meacham, from 5 Soudley building to Legal building, South Park square, Asheville, N. C.

Dr. Loula A. Rockwell from American National Bank building to Legal building, South Park square, Asheville, N. C.

Dr. Joseph Ferguson, from 118 Quincy street, to "The Renaissance," 488 Nostrand avenue, Brooklyn, N. Y.

Dr. J. W. Banning has removed his New York City office to Hotel Martiniqne, 56 West Thirty-third street.

Drs. Wm. Clare and Nora R. Brown, from Edith building to 182 Main street, Waterville, Maine.

Drs. W. T. and Bertha L. Thomas, at 821-22 Fidelity building, Tacoma, Washington.

Dr. Frances Thoms, from 1223 Alaska building, to 1521 Fifteenth avenue, Seattle, Washington.

Dr. George C. Wilke, at Box 243, Eadville, Colo.

Dr. Rose Wismer, from Kallispell, Montana, to Malvern, Iowa.

Dr. F. C. Titus, at 219 North Weber street, Colorado Springs, Colo.

Dr. J. Wesley Fager, from Harlan, Iowa, to Mankato, Minn.

Dr. C. M. Higinbotham, from Philadelphia to Honesdale, Pa.

Dr. Harry C. Kirkbride, at Findlay, Ohio.

Dr. John F. Krill, at Box 132, R. No. 3, South Bend, Indiana.

Dr. S. E. Lyte, from Des Moines, Iowa, to Florence, S. C.

Drs. I. L. Moore and Katherine Arnold, at 805 N. Main street, Porterville, Calif.

Dr. Mary Ewing Murray, at 9-10 Holton block, Helena, Mont.

Dr. Arlowyne Orr, from 812 Missouri Trust building, to 5063 Morgan street, St. Louis, Mo.

Dr. James A. Savage, at Cape Girardeau, Mo.

Dr. Sylph Sturgeon, at 2844 Humboldt, Denver, Colo.

Dr. Dale W. Thurston, at Antioch, Calif.

Dr. William Royal Westfall, at Ashtabula, Ohio.

Dr. Florence Boles, from Kallispell, Mont., to Malvern, Iowa.

Dr. Ralph H. Burdick, from Tonopah, Wash., to 910 Wright & Callander building, Los Angeles, Calif.

Dr. Isabel Christy, from Deer Lodge, Montana, to Montrose, Colo.

Dr. A. P. Davis, from 614 Hill avenue to 3331 Fifth avenue, Pittsburg, Pa.

Dr. C. W. Eells, from Trenton, N. J., to Van Ness Hotel, 138 Petoskey street, Petoskey, Mich.

Dr. J. E. Gable, from Evanston, Ill., to Central Natl. Bank, Cambridge, Ohio.

Dr. Mary La Fonda Gable, from Downer's Grove, Illinois, to Byersville, Ohio.

Dr. Geo. M. Goodell, from Tama, to 623 Story street, Boone, Ia.

Dr. Albert E. Gooden, and Alice S. Gooden, at 401 1/2 West Third street, Red Wing, Minn.

Dr. Florence R. Haile, at 16 de Septiembre, No. 12, Mexico City, Mexico.

Dr. Geo. A. Haswell, from Westfield, Mass., to No. 10 Chestnut street, The Kenson, Springfield, Mass.

Dr. Kate Childs Hill, from Berkeley, Calif. to Delano, Calif.

Dr. Minerva Kanaga, from Trinidad to Limon, Colorado.

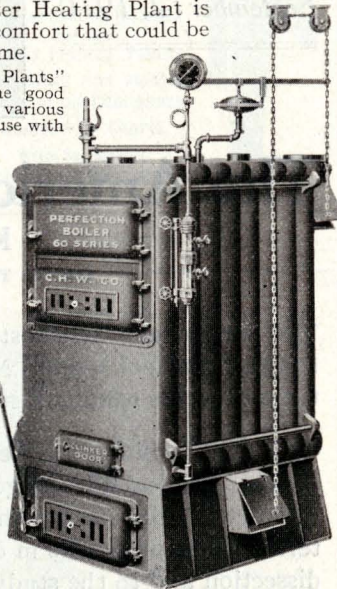
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DISSOLUTION OF PARTNERSHIPS.

Dr. H. S. Loving and Dr. Wilden P. Snare, of Denver, Colo., have dissolved partnership. Dr. Snare retains the old office and Dr. Loving is located at 423-424 Commonwealth building.

MARRIED.

Dr. Herbert Lewis Bucknam and Mary Parthenia Sutherland, September 14th, at Paris, Ill.

Dr. Charles John Higinbotham and Miss Emily Wilkinson, July 31st, at Lake Bluff, Ill.

Dr. W. A. Gaylord and Mrs. Magdalin Stepler, August 29th, at Kenton, Ohio.

Dr. W. C. Dawes and Miss Nelle Park, August 3d, at Bluffton, Ind.

BORN.

To Dr. and Mrs. W. L. Nichols, of Enterprise, Ore., August 24th, twin boys.

To Drs. O. F. and S. Etta Heisley, of Silverton, Ore., June 29th, a son.

DIED.

Mother of Frank A. Smith, September 12th, of apoplexy, at Bloomington, Ind., aged 65 years.



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