

# **The Osteopathic Physician**

**July 1921**

**Vol. 40, No. 1**

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# The Osteopathic Physician

Published on the 15th of Every Month by THE BUNTING PUBLICATIONS, 9 S. Clinton St., Chicago, Illinois. Subscription Price: \$3.00 per annum. Copyright 1921, by THE BUNTING PUBLICATIONS. Entered as Second-class matter April 7th, 1903, at the Postoffice at Chicago, Illinois, under the Act of March 3d, 1879.

Volume XL

CHICAGO, JULY, 1921

Number 1

## Two Years of Western Progress

By George F. Whitehouse, D.O., Los Angeles, Calif.

In last month's issue of the Osteopathic Physician there appeared an article on the Chiropractic Campaign in Colorado in which I was given credit for the success of the campaign. This is not wholly correct, for while I had charge of conducting the campaign, if it had not been for Dr. C. W. Bumpus and Dr. D. L. Clark of Denver, the campaign never would have been started. These two men first appeared before the Rocky Mountain Conference in July, recommending action, but had their recommendations voted down unanimously. In spite of this they came back a second time, several months later, after which a meeting was called and the matter again dropped, but realizing that the public does not differentiate between chiropractic and osteopathy, and that osteopathy would be brought down to a lower level than it already had been if all the ignorant chiropractors that had been kept from getting a license previously were given a license at one swoop, they came back a third time, and this time got action.

To these two men and the other members of the Legislative Committee—in fact, to the entire Colorado profession, is due the credit for the success of this campaign. With the same co-operation, success would crown the efforts of any organization.

But the Colorado campaign, was not the only campaign that has been put over by the western profession. During the two years preceding this campaign, I had the pleasure of directing ten similar campaigns, each and every one of which was just as successful and just as important as this one, and many of them required a great deal more time and much harder work. The following is a brief discussion of these ten campaigns. Several were not exactly in the nature of campaigns, yet similar, and requiring much more personal work. The total time that expired between the beginning of the first campaign and the end of the last one was twenty-six months. The actual time spent in organizing and conducting them was only twenty-two months, or less than two years.

### Membership Campaign

During the membership campaign, two State associations and fourteen local societies were organized. Of the ten local societies previously in existence, several had not held a meeting for a year. Others had had perhaps one meeting. Two years later every one of these twenty-four societies, including the fourteen newly organized, were holding regular monthly meetings. Today every osteopath living in any of the states affiliated with the western association has a local society near enough to him to be able to attend regularly.

A uniform fee of \$25.00 for dues was adopted in all of these states. Of this amount, \$2.50 was allotted to the local society; \$5.00 to the state association; \$2.50 to the western association, and the remainder to legislation and other purposes. In spite of increasing the dues from

\$5.00 to \$25.00, the membership in every state was materially increased, and in several of the states more than doubled.

The attendance at all meetings was increased beyond any one's fondest hopes. I was informed by the osteopaths of Idaho that at the State meeting the year previous there were just three present. They met and elected one of their number president, one vice-president, and the other one secretary, and then went home. At the State meeting two years later between

### A Two Year Western Record That Has Never Been Equalled

Two state associations organized.  
Fourteen local societies organized.  
Western Osteopathic Association organized.  
Western circuit clinic organized.  
Uniform dues of \$25.00 adopted in all states.  
Uniform constitution and by-laws adopted in all states.  
Membership increased in every state, almost doubled in several.  
Legislative campaign conducted in California.  
Referendum campaign conducted in California.  
Letter campaign to Congress conducted in California.  
Similar campaign conducted by four northwestern states.  
Eleven thousand dollars contributed by the Denver osteopaths to establish the Rocky Mountain Osteopathic Hospital.  
Fifty thousand dollars contributed to the College of Osteopathic Physicians and Surgeons by the western profession.  
Twenty thousand dollars additional contributed to the college by the student body.

fifty and seventy-five per cent of the osteopaths of Idaho were present, and what this means can hardly be comprehended by osteopaths in the east. The car fare from one part of Idaho to where the meeting was held, which was near the center of the State, is more than the car fare from New York City to Chicago. The time required to travel is more, and the actual distance about the same. How many New York osteopaths would attend a State meeting in Chicago? Likewise the distance regularly traveled by some Idaho osteopaths to attend local meetings is greater than the distance from Philadelphia to Baltimore, from Cleveland to Toledo, or thirty miles farther than from Chicago to Milwaukee. Imagine a Chicago osteopath attending his local monthly meeting thirty miles north of Milwaukee! Most of them don't attend on Dearborn Street.

The number of osteopaths in the west who attended local society meetings during the last six months of the two years mentioned above, was almost five hundred per cent greater than

during a similar period several years preceding. Excluding five of the larger societies, the increase in attendance at local society meetings was almost five thousand per cent.

### Western Association Established

After the State associations and local societies had all been thoroughly organized, the Western Osteopathic Association was established. Every western state joined the association with the exception of Washington. All the states were invited to send delegates, and all joined in doing so with the one exception.

It was Dr. Sylvia Boyce, of Berkley, who first suggested to me the idea of establishing such an organization. Later I learned from Dr. Spencer that he had corresponded with the western states more than a year previous with the view of establishing a similar association.

### Circuit Clinic

Following the establishing of the western association, the idea of the Circuit Clinic occurred to me. It met with immediate spontaneous approval from all the local societies in all the states affiliated. To the Circuit Clinic must go the credit for the large attendance at local society meetings, and for keeping the states affiliated. Otherwise the western association would probably have died ere this. It is only another proof of the fact that any organization that is not active is dead, or soon will be. It may hold an annual convention, but its influence at other times is nil, or nearly so.

While the idea of the Circuit Clinic took like wildfire with virtually all of the western osteopaths, to Dr. Ruddy is due much of the credit for putting the Circuit Clinic on its feet. Not only did he make the first trip over the circuit, giving his time unstintingly from early morning until midnight, in diagnosis, operation, treatment and lectures, but he earned for a number of the societies enough money to pay the expenses of several succeeding speakers. When Dr. Ruddy was followed by Dr. Edmiston with his masterful osteopathic technique, the profession all gasped, and a few of the "doubtful Thomases" said, "How can such wonderful osteopathy come from the Los Angeles college?"

### Publicity Campaign

The publicity secured during the last three months of the Circuit Clinic, will, I believe, exceed the total of publicity secured throughout the United States during any one year—in fact, I believe I am safe in saying, any three years. It was not accomplished though, without an effort, for even with Dr. Ruddy's masterful way of writing publicity, he could not give it local color for each of the hundreds of small towns, so it did not go in. He tried to get the local osteopaths to re-write what he sent them, but it did not work. For a while we were both at a loss to know what to do. Finally I spent an entire week in co-operation with Dr. Ruddy in working out new plans, which even Dr. Ruddy admitted could not be improved. We immediately set out to supply each western newspaper with a separately written article, and an average of approximate-

## THE OSTEOPATHIC PHYSICIAN

ly thirty such typewritten articles were mailed from the western association office each day; every newspaper in every city in all the western states receiving a news item with sufficient local news to assure its being published. The co-operation of the local publicity chairman was then enlisted, and the results were remarkable. Nearly every newspaper gave us space. Some articles were published verbatim, while others were entirely re-written, but virtually every newspaper published something. One newspaper in Blackfoot, Idaho, gave a report of one meeting, which was one column in width and more than eight foot in length. The expense to the association for this publicity work was less than two dollars per day, while the daily space given us could not have been bought for two hundred dollars.

### Constitution and By-Laws

After Dr. Spencer was elected president of the California association, he was unable to secure from any one a copy of any existing Constitution and By-Laws. This allowed us to go to work without being hindered at every turn by pre-existing rules, and when the year's work was completed we simply wrote down an explanation of what had been done. This constitution, therefore, was practical, and served as an explanation of what was being done, rather than as a hindrance to progress as is so often the case.

The constitution and by-laws was so written that it governed simultaneously the state association, the local societies, and the western association. The state association was made supreme, the local societies subsidiary to the state association and the western association a means of carrying on such interstate work as met with the approval of two-thirds of the states affiliated. This constitution was later adopted by all of the other western states.

### Legislative Campaign

Almost four months were spent in conducting a campaign to secure the passage of four osteopathic bills in the California legislature. The effect of one of these bills was secured by the committee through a compromise with the medical board during a conference, and the other three bills passed both houses of the legislature, in spite of an unusually bitter fight by the medical profession. Some of the incidents of this campaign are interesting, to say the least. One of the three bills passed the senate on the last day, when the calendar was crowded and other important bills were being passed every few minutes without discussion. It took three hours for debate on this bill behind closed doors, every member being compelled to listen to the discussion and to vote, and it passed by a majority of one vote.

On another occasion one representative from Los Angeles voted against one of the three measures. This happened about 11:30 a. m. By 12 o'clock Dr. Spencer and Dr. Vanderburgh had a wire under way informing me of this fact. This telegram reached me at 1 o'clock. By 2 o'clock I had informed the subdivision legislative chairman of the city of Los Angeles, who immediately got in touch with the osteopaths of their sub-division, and each of these osteopaths in turn telephoned to one of his most influential patients and asked him to wire this representative before 5 p. m. At 7 o'clock that evening this representative got up on the floor of the house and made the following statement: "Gentlemen and ladies, I hold in my hand sixty-three telegrams from some of the most intelligent people in the city of Los Angeles, asking me to vote for this bill, but I am agin the bill." Immediately another representative arose and replied to this statement by saying, "Gentlemen, you have your choice between the opinion of sixty-three intelligent citizens of Los Angeles and that of Mr. —. How are you going to vote?" Considering the grammar the first speaker employed, every one got the point and

the house rose in an up-roar of laughter.

### Campaign to Secure Governor's Signature

Following the legislative campaign it became apparent that influence was being used to prevent the governor from signing the three osteopathic bills that had been passed. A campaign was, therefore, immediately launched to secure the governor's signature. Thousands upon thousands of citizens wrote the governor asking him to sign these bills, but in spite of this fact, he vetoed one of the three bills. Shortly afterward he appointed the attorney for the medical board to the position as judge of one of the higher courts of California. Just why the governor vetoed this bill, against the wishes of thousands of citizens, and then appointed its most bitter opponent to such an important position, has never been explained. The vetoing of this bill was the only defeat of the entire ten campaigns. In every other instance the goal set was reached. I have always felt that even this defeat was not necessary. I recommended that an advertising campaign be launched in which a full-page advertisement would be carried in every newspaper in every city in which osteopaths were practicing. Advertisements were written and even mailed out, but some of the Los Angeles osteopaths feared it might prove a boomerang, and, therefore, voted down the plan. I still believe that if this advertising campaign had been carried out, and every citizen in the state of California informed of the justice of this measure, that the governor could not have vetoed the bill and permitted the newspapers throughout the state to publish the news of his veto.

### Referendum Campaign

During the same legislative session, through a trick on the part of the medical representatives, a bill was passed that took from the osteopaths the right to use narcotics. A campaign was, therefore, instituted at once, to secure the necessary number of signatures to cause this bill to be vetoed on by the people before it became a law. The necessary eight per cent of signatures were secured in approximately ten days, by the osteopaths and their patients. A few solicitors were employed in several cities to secure names, but it was later found that these names were not needed. The memory of the herculean effort that was made by some of the Los Angeles osteopaths in this campaign will remain with me as long as I live. Space forbids the mentioning of more than a few, but the names of Dr. Lillian Whiting, Dr. Norman G. Stewart, Dr. W. H. O'Neil, and Dr. J. W. Scott stand out so strongly that I can't help mentioning them.

### Denver Hospital Campaign

Eleven thousand dollars was raised from the Denver osteopaths for the establishing of the Rocky Mountain Osteopathic Hospital. I arrived in Denver on January 6th and left on February 1st. During this period of less than four weeks, the osteopaths of Denver affiliated with the western association, adopted the new constitution and by-laws for both the state association and the Denver society, agreed to co-operate in the Circuit Clinic, and subscribed eleven thousand dollars for the establishing of a hospital. More than one-fourth of this was paid immediately. Several buildings were thoroughly investigated, a building chosen, and on the day I left I personally completed the contracts for the hospital, and called upon the city physician and secured his promise for a permit for its operation. All this in less than four weeks, yet the Denver profession informed me that they had been trying for four years to get a hospital established.

### College Endowment Campaign

Fifty thousand dollars was raised from the western profession for the College of Osteopathic Physicians and Surgeons, largely in two hundred dollar subscriptions. The manner in which the profession responded to this call was

certainly most gratifying. While there were some few eastern graduates who seemed to be misled by eastern misinformation concerning the western schools, when the real facts were presented to them they were more than willing to support the only osteopathic institution in the west.

Similarly, more than twenty thousand dollars additional was raised from the student body. This was made payable in very small payments while in school, and in gradually increasing payments after graduation, the full amount being payable in approximately five years after entering practice.

### Campaign to Washington

Though mentioned last, the first campaign in California was a Letter Campaign to Congress, in which approximately one hundred thousand letters were sent to Washington in ten days; more letters, according to the representatives' own statements, than were ever received concerning any one bill since California became a state. All of the senators and representatives from California, with one exception, agreed to vote for the bill by the time of the close of this campaign.

### Northwestern Campaign

A similar campaign was conducted in the states of Washington, Oregon, Idaho and Utah, in which approximately forty thousand letters were sent to their representatives and senators at Washington.

It would be impossible to mention the names of all the osteopaths who had to do with the success of these campaigns. It would include almost ninety per cent of the western profession. Fortunately, less than one per cent spent their time criticizing while others were working, or the results might have been different.

It would be unfitting, though, to conclude this article without giving credit to Dr. Chas. H. Spencer, of Los Angeles, and Dr. W. W. Vanderburgh, of San Francisco. To their cheering words of enthusiasm is due what little I was able to accomplish, and to their wonderful leadership and their willingness to sacrifice both time and money, the profession owes the success of more than half the campaigns above mentioned. If men like these, and others mentioned in this article, would be en-

### "Wonderfully Well Pleased" with "A. T. Still; Founder of Osteopathy"

Dr. O. R. Meredith,  
Nampa, Idaho

April 9, 1921

Your book, "A. T. Still, Founder of Osteopathy" by M. A. Lane, came this morning and I am wonderfully well pleased with the appearance of the same.

Your "Foreword" speaks well for the volume. The contents, so well paged, as well as your "Index" are very commendable. A person should be able to get at any subject that he wishes from this. The book is handsomely printed and aptly bound.

For one, I pledge myself to buy more osteopathic books than ever in the past.

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O. R. MEREDITH, D.O.,  
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trusted with the leadership of our national association, what has been done in the west might be duplicated in the east in a comparatively short time, and what a wonderful thing it would be if we could all again be proud of the progress our profession is making.

The following is a twelve months' program that would not only be possible under the right leadership, but would serve to cheer the heart of every osteopath no matter where he might be, give him the courage to take hold anew, and start osteopathy on the road to a renewed success, such as it has not experienced since Dr. Still's followers first hailed it to a drug-ridden world.

**A Twelve Months' Program that Would Make Every Osteopath Forget There Ever Was Such a Thing as Chiropractic**

- Organize twenty-five new local societies east of the Rockies.
- Re-organize twenty-five more which are not now holding regular meetings.
- Double the average collective attendance of those holding regular meetings.
- Organize six territorial associations similar to the western association.
- Organize six Circuit Clinics similar to the Western Circuit Clinic.
- Establish uniform dues of \$25.00 in every state, to include dues for the state association, local societies, territorial association, and to cover all assessments for legislation, publicity, etc.
- Adopt a uniform Constitution and By-Laws in every state. (Far more practical than uniform medical laws and a necessary step in that direction.)
- Increase the average collective attendance at all state association meetings more than 25%.
- Increase the membership in every state in the Union to over 75%, as high as 100% in some, and an average of 90% in all the states collectively.
- Send five hundred students to our osteopathic colleges next fall.
- Introduce and probably pass within the twelve months, a bill in Congress that will recognize osteopathy in both army and navy, and forever avoid our being shut out in the consideration of national health problems.
- Conduct a chiropractic campaign in every state, which would be the beginning of the end of chiropractic.

If the above were carried out during the next twelve months, the entire profession would be so thoroughly organized that they could control all future legislation pertaining to osteopathy in nine out of every ten states, and possibly in all of them. What might be accomplished through such an organization in succeeding years you can picture for yourself.

Cut out the above, my dear osteopath, pin it on the wall and look at it several times each day, and see if you do not believe that the bringing about of these changes would be a worthy ambition for any profession, and a most necessary ambition for the osteopathic profession, if it expects to save itself from being outnumbered ten to one by an inferior school of practice. Then get your dander up, close your office, attend the national convention, and insist that something be done, and, if you are turned down, insist again and keep on insisting. If you insist long enough and hard enough you will get just what you want. However, don't be misled by promises. Demand a vote that will mean action, and if you don't get action, don't blame any one but yourself. The road to *success* lies by way of *action* and *results*.

**Cut Thin, Too!**

Chiropractic is one slice off the osteopathic loaf.— Addison O'Neill, D.O., Daytona, Florida.

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—and—

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In putting up our splendid building at Waukegan we spent so much more than was estimated that we found it necessary to draw heavily on a fund which had been set aside for printing machinery.

In order to complete the installation of our full equipment of modern machinery and equalize the drain created against this fund by excessive building costs, we find it necessary to sell our Preferred Stock. This stock carries a cumulative interest of 8%, costs \$100 per share, and is retirable at \$105 per share, thus, if recalled at the end of five years, netting its owners an even 9 per cent income per annum for that period. If recalled before the lapse of five years its earnings will exceed 9 per cent per annum. It is preferred both as to Assets and Dividends in *The BUNTING PUBLICATIONS, Inc.*, and no dividends can be paid on Common Stock until the holders of the Preferred have been paid their stipulated interest.

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Cordially, *The BUNTING PUBLICATIONS, Inc.*,  
Henry Stanhope Bunting, President  
Waukegan, Illinois

**Subscription for Preferred Stock in *The BUNTING PUBLICATIONS, Inc.* Waukegan, Illinois**

Enclosed find my check for \$\_\_\_\_\_ being a 20% cash payment toward \_\_\_\_\_ shares of Preferred 8% stock. I will pay the balance of \$80.00 per share at the rate of \$10.00 per share per month, and understand that I am to receive the number of shares subscribed for on completion of monthly payments above referred to.

Date \_\_\_\_\_ Signature \_\_\_\_\_  
Address \_\_\_\_\_  
City and State \_\_\_\_\_

## Mr. William Rockefeller's Hearing Restored Through Operation By Dr. C. H. Muncie

After having consulted eminent aurists in this country and abroad for the relief of a progressive deafness and receiving neither relief from his deafness nor a retarding of its progress, Mr. Wm. Rockefeller has been greatly benefitted by an operation and after treatment at the hands of Dr. Curtis H. Muncie, of Brooklyn. Upon making a thorough examination the osteopath found that the patient had a far advanced case of catarrhal deafness of each ear, a blood pressure of 227 and severe auto-intoxication. Two weeks osteopathic treatment corrected the auto-intoxication, reduced the systolic pressure to 162 and prepared the patient for an operation which was done under nitrous oxide and oxygen, administered by means of the Heidbrink apparatus.

Dr. Muncie performed a constructive finger surgical operation reconstructing the eustachian tubes and naso-pharynx. He then operated intranasally, adjusted the middle turbinates and reset the septum, which was the original cause of the catarrhal trouble.

The immediate result showed an improvement from the one inch watch test to fourteen inches; subsequent treatment restored the hearing to a point where the same watch could be heard three feet. Tuning fork tests were correspondingly improved and now ordinary conversation is heard.

The nose operation completely relieved susceptibility to colds and greatly improved Mr. Rockefeller's breathing capacity.

Further steady improvement in hearing is expected up to 80% normal. To date what has been accomplished has required only two months. The disability has been present about eighteen years and was progressive in spite of persistent treatment during this period by aurist.

Mr. Rockefeller is the brother of Mr. John D. Rockefeller. He is eighty years old, straight as an arrow, mentally and physically alert, kindly and very democratic in spite of the fact that he is said to be one of the four wealthiest men in the world. He is a self-made man. His motto for success is "work"—and he lives up to it daily and enjoys it, but health and hearing come first before business hours.

Such results as were accomplished in this case well illustrates the possibilities of Osteopathic Finger Surgery when skillfully done.

### Giving Hearing To a Case of Congenital Eustachian Stenosis

Another spectacular case which proved to be very taxing upon the operator was that of a boy, fifteen years old, who recently went to Dr. Curtis H. Muncie for examination with a history of deafness since birth. Examination disclosed the fact that the auditory nerve was normal; that his perception centers were slightly defective through lack of development. The eustachian tubes were almost completely lacking. They might be compared to those of a seven months' foetus. The tympanic membranes were badly retracted, with impaired mobility. All forks gave a Rinne negative, with negative air conduction for C. fork. The boy had a distinctive paracusis willisiana; in fact, his hearing was almost negative except under very noisy and loud environment. Dr. Muncie performed a spastic finger surgical operation. Following the course of the rudimentary tubes, two normal sized eustachian tubes were constructed through to the osseous portion.

From the first breath of nitrous oxide to the awakening of the patient occupied just six minutes. But it was a busy and successful

six minutes! The patient was cured of deafness. For the first time in his life he could hear ordinary conversation. He could even hear a watch 16½ inches away, which, of course, had never before been heard.

Immediately after the operation, the boy's father came into the operating room. The doctor said to the patient in ordinary tones, "Did you have a nice dream?" He looked up and shouted, "I can hear." His father with difficulty tried to comprehend what had been done, for the boy had long since been given

## Following the "Old Doctor" in Treating Gallstones

By John M. Ogle, D.O., Moncton, New Brunswick

A patient, female, age 20, of highly nervous temperament—as Dr. Geo. Laughlin would say, a neuropathic constitution—had suffered a nervous break-down following the sudden death of an uncle and the prolonged illness of the mother. She had many symptoms, and something new developed each day. I was called in one evening and found her suffering with intense pain in the region of the gall bladder. In the course of six hours she had turned quite dark and yellow. A diagnosis was made of catarrhal jaundice. Knowing the case quite well, I told her an experience that I knew the "Old Doctor" had had in treating conditions of the liver, and the results obtained by him. I used the technique that he described to us by steady and deep pressure over the gall tract, executing a reversed letter S from the tip of the ninth rib to the umbilicus, thereby forcing the mucous plug from the gall duct, and then with light pressure over the bladder, apparently securing drainage. I then told her that within four hours there would be a complete evacuation of the bowel and in just four hours and ten minutes the bowels moved thoroughly

up as hopeless by aurists of this country and abroad.

That operation was performed several months ago. The tubes healed and became functionally and anatomically normal. The hearing had improved up to 85 per cent normal at the date of the last test.

An interesting feature in this case, besides the congenital stenosis, was the improvement of the auditory center. In other words, deficient functioning had not allowed normal development of the perception nerve centers. These were developed after the operation through mental concentration of sound, imagination of sound and excessive use of audition in ordinary conversation. This shortly overcame the "shut-in" personality so often present in deaf cases.

and there was a marked improvement in her condition within ten hours. One of the medical men here said she would have to be operated on at once.

There is nothing new in this technique. We are only following in the lines of the "Old Doctor." I once heard Dr. Charlie say, "I wish some one could bring out something new that Father had not used successfully." In my humble opinion we must follow closer the fundamental principles as practiced and demonstrated by Dr. Andrew Taylor Still. There is not a day that passes but I am surprised at the results I obtain through osteopathic treatment as I interpret the principles as laid down by the Grand Old Man.

The late Dr. Frank Pratt wrote in the Old Doctor's book that I have and use, "Follow your guide and fear no evil, the lesion points the way in osteopathy." Too many of us do not reason from cause to effect and from effect back to cause, and fail, and then the public thinks osteopathy fails when in reality it is the osteopath that fails.

## "B. J." Tells Kiwanians Secret of Chiropractic Therapeutics

By Harry L. Chiles, D.O., Orange, N. J.

B. J. Palmer lectured not long ago in New York before the Kiwanis Club. I heard him. Bee Jay is the "Fountain Head" of—. I am not accusing him of this. He admits it.

He discussed printer's ink rather than—. Perhaps he knows more about printer's ink. Perhaps there is more to be known about printer's ink. Or maybe the choice of this subject was the admission that printer's ink is the main phase of—. He didn't say. Nor shall I.

The room was sulphurous with the impression that if there were no printer's ink there would be little of interest for Bee Jay in—. He said that Emerson's oft quoted and, up to that lecture, generally accepted statement that a man who made a better mouse-trap than any one else—makes no difference where his place of business may be located, he will have 'em coming his way—was a falsehood; (he used right out in meeting the short and ugly word); unless Emerson's statement is amended by adding the words "that he make liberal use of printer's ink." Bee Jay does not believe in waiting. Those sixty suckers born and reaching the sucking age every hour makes haste very desirable. Printer's ink is what suckers fall for. Bee Jay has personal knowledge of that.

Bee Jay reported that some years ago he went "through" Yale. (He made it in one

afternoon.) He does not believe in lingering long in college, and he is consistent about it, too—he does not encourage others to do in this regard what he didn't do himself. If he had stayed in Yale awhile maybe he would have fared better at the hands of the lawyer up in Alberta when he lost his case and admitted in open court that pediatrics was chiropody. But while on Yale's campus he learned that there was a school of "salesmanship" and nothing to sell. He found also there was a school of "medicine" which he said must be sold but the doctors-to-be were not taught how to sell it.

Bee Jay determined to improve on Yale. He is boastful of the fact that his is the first professional (?) institution devoted to the healing art which has a printing establishment of its own. To listen to B. J. it is the busiest and, to him, the most important branch of his business. Those printing presses and his "school of salesmanship" have caused 2100 students to "sell" themselves to him the past year, and—long before this—for the speech was several months ago—they are all selling to the gullible public what they bought from B. J. So convinced is he of the power of printer's ink and of his presses that he is preparing for 20,000 students (?) within the next year or two. All of which B. J. confided to his fellow Kiwanians—and to me.

Yes, B. J. knows what Lincoln says about fooling all the people. But B. J. says, why should he worry about *all* the people? He gets solid comfort out of that other close observer who has assured him that sixty per hour are momentarily ripening from whom to fill his coffers.

B. J. didn't tell any of his plans for a faculty for those 20,000 students(?), nor of the impossibility of handling such a body of men and women. He knew the time was short and no questions would be asked. Analyzed, what B. J. said was that printer's ink had put Davenport on the map quicker than merit had put Rochester on the map; and a column or two in the local newspaper a few times per week would make the name of one whom he had taught to use it known to more people than to one who had spent years upon years at Yale and in hospitals to learn to be useful but would not employ printer's ink.

When B. J. "left" Yale it was to remedy this defect of the university. If he has made his school of salesmanship as prominent in his course as he did in discussing it with these business men, I wondered if it was not altogether possible for his students(?) to accept this as the major course in the curriculum and go out with the idea that if they have mastered the art of salesmanship they can sell it—at least for awhile, in almost any community, regardless of whether they have studied and mastered it or not.

Having the opportunity to "rest my intelligence" while he was discussing evolution, the constant evolving of a higher order due to the persecution of the order below (his is now the highest order, due to this persecution) I wondered if "B. J. himself" was not the worst enemy of—, if he was not personally responsible for the worst in it which we see—its *business* methods; and the whole egotism of the proposition, that might makes right, and that numbers—the sheer force of numbers of practitioners and come-and-go patients—is really establishing a system of medicine. I wondered—I still am wondering.

### Look Out For "Spine" Halladay!

He and the "Missus" and the Kiddies are on their Way to the Golden West

[From the Kirksville Express, June 30th]

Dr. H. V. Halladay is considerably worked up over the kind of weather we have been having lately because he is all dressed up and no place to go.

Dr. Halladay has been working hard to get an automobile fixed up so that he and his family can travel with the greatest possible comfort to the Yellowstone Park, and now the roads are in such condition that, of course, he hesitates to make a start.

Dr. Halladay is very handy with tools and good at originating the ideas he works out, so it goes without saying that his outfit is unique. One would not believe that so much of a traveling house could be crowded into such small space.

Besides Dr. and Mrs. Halladay, there are in the family two children, seven and a half and five. So there are four seats in the automobile, each of which rotates on its own axis so to speak, independently of the others. The Dr. and Mrs. Halladay can look out straight ahead or through a little window on each side, and there is also another little window in the side for each youngster to look through. All of these windows are so arranged that they can be fitted with glass when it rains and with screen in case of dust or insects, or left entirely open when so desired. There are two other little windows in the back of the "house" so that if the children prefer, they can lie in their bed and look out by the rear door.

The bunking arrangement is a two-story affair with one bed almost on the floor of the car, and the childrens' bed consisting of a sort

of canvas cot higher up. This cot is hinged so that it can fold back with the bedding behind it when so desired. Underneath the lower bed, there is room for storing clothing, food, etc.

Along one side of the car is a series of hooks to which may be attached a tent that will then extend down to the ground to a distance of some feet away.

Dr. Halladay is on the program of two or three big western osteopathic conventions. He is known throughout the osteopathic profession as "Spine" Halladay, because of the discoveries he has made as to methods of dissecting and professing the pliability of ligaments in the body. He can remove all of the flesh from a skeleton and still leave the ligaments on the bones together so that they can be put into movements, and can be kept this

way an indefinite length of time. No other anatomologist in the world is familiar with his secret. Some doctors of the drug school have attempted to learn the secret from him, and he has freely offered to make it known on one condition: that he be given proper credit for the discovery, but it is known that the old school doctors are able to see to it that some of their number get credit for any osteopathic discovery they seek to adopt. For that reason the secret is kept.

The first convention before which Dr. Halladay will appear will be the Rocky Mountain Conference held at Colorado Springs some time in July, then in August a big convention and post graduate week will be held at Great Falls, Montana. Not only Dr. Halladay, but Dr. Geo. Still will be present from Kirksville.

# The Osteopathic Specialist

in

## Diseases of the Ear, Nose, Throat and Eye

An incomparable brochure, designed for the use of both the specialist and general practitioner of osteopathy.

This brochure was written in the main by Dr. J. Deason and Dr. T. J. Ruddy, assisted somewhat by *HSB*, and has been read over and heartily approved by a number of our leading specialists, including Drs. C. C. Reid, H. J. Marshall, J. D. Edwards, W. J. Siemens, K. L. Seaman and others.

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### The BUNTING PUBLICITY SERVICE for OSTEOPATHS

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## X-Ray Disclosed Unsuspected Causes Of Four Cases

By Irwin K. Moorhouse, Beaumont, Texas

I had a series of cases this past week that illustrated the value of the x-ray in clearing up some puzzling conditions, so I thought they might be interesting to others.

Case 1.—Patient has had attacks during the past year that gave every symptom of ovaritis. They were periodical, the characteristic pain was present; the leg would be badly contracted and flexed; in fact, every symptom clearly pointed to the right ovary. The case being very resistant to treatment, an x-ray was taken with the following results: right fifth lumbar transverse process was found to be about two and one-half inches long and protruding into the body of the psoas magnus in about the place where the femoral nerve passes. I believe that the congestion occurring with the menstrual period caused these attacks. Removal of this tuberosity instead of the ovaries and tubes was advised.

Case 2.—Patient after recovery from a light attack of influenza suffered from vague pains in the left chest. These were not enough to cause one to suspect an angina and there was no thrill present. Not getting proper results, an x-ray was taken which showed an aneurysm of the arch of the aorta and descending aorta almost as large as the heart itself.

Case 3.—This case was a fracture of the surgical neck of the humerus in a child of ten years and which showed absolutely no deformity of the shoulder and would have been very difficult to diagnose ordinarily.

Case 4.—This case proved to be Potts' disease of the 12th dorsal, 1st, 2nd and 3rd lumbar and sacrum. The amount of destruction was very great while the symptoms were very slight. The patient just came in complaining of an ordinary backache. Treatment seemed to make things worse, as it naturally would in such a condition. Plaster cast was applied with extension and pain has ceased.

These cases have shown me the value of using anything and everything that will assist in arriving at a correct diagnosis. Too often we become careless in our every-day routine of practice and we are apt to neglect to do that which is necessary for the best interests of the patient. We will be amply repaid for all the extra effort we put forth by the increased confidence that the general public will have in osteopathy as a profession. A high standard of thorough diagnostic methods will certainly differentiate us from our imitators. Just a brief spinal palpation as a routine measure is not enough and before we blame all the patient's symptoms onto a subluxation condition we should exclude such conditions as lumbago, neurotic spine, sacro-iliac disease, constipation, hemorrhoids, pelvic disease, gastric tympanitis, postural condition, post-operative backache, prostrate disease, pendulous abdomen, chronic appendicitis, acute infections, indurative headache and floating kidney, all of which will cause backache.

day, and always planning for a few days ahead.

I believe I will get a liberal support from the profession—that is, their moral support, and, furthermore, I expect to employ a high-class publicity man. There is a big field for osteopathy and there is no reason why I can not build up a school of twelve or fifteen hundred students here in a half dozen years.

You spoke of poor housing facilities in Kirksville. I have just made arrangements with Kirksville capitalists to build a six story hotel and to build a large modern apartment house. As for clinics, I think I can produce them—not of course in as large numbers as we could get in a city, but I can build up, I think, a very satisfactory clinic. The ethical use of printer's ink will do a good deal in improving that situation.

Kirksville is the proper place for the school for another generation; but, in time, we should have a dozen good schools in the larger cities. If I make a success at this venture, I will help to build them elsewhere. I presume you think these are pretty big ideas but you know we have to have the vision before we can accomplish anything.

I think I have myself sized up for just about what I can do. I know my limitations and I am not spending any time throwing bouquets at myself. Harry Still says I will go broke, and Hildreth is dead against it; but as I have made every dollar that I have and believe that I know fairly well how to take care of it, I see no call for any one shedding tears if I see fit to put a couple of hundred thousand into a venture of this kind.

I am personally acquainted with nearly every osteopath in the profession, and I believe the majority of them will be supporters of the school conducted along the plan I have in mind.

This enterprise will not carry any dead-weight and will not be handicapped by a lot of loafers looking for a meal ticket. I am determined to put it over, believe that I can, and I want to thank all my friends for the letters of encouragement I am receiving.—*Geo. M. Laughlin, D.O., Laughlin Hospital & Training School for Nurses, Kirksville, Mo.*

## Wisconsin Board Now Recognizes A. S. O.

"The Wisconsin State Medical Board of Examiners has finally recognized the American School of Osteopathy, and A.S.O. graduates are now entitled to take the board's examinations," writes Dr. Geo. A. Still, president of A.S.O.

This is a victory for the school and profession alike. It is also a good tribute to the administrations of the school. In fact it is the second victory of the sort achieved by President Geo. A. Still as, when he first entered upon the nominal presidency of the institution, there were three states that refused to examine A.S.O. graduates, while now but one, New York State, remains in that unreasonable position.

### ASO Offers "Guarantee" to N. Y. Students

"New York is the only state now that does not recognize A.S.O. as entitled to prepare osteopaths for practice," says Dr. Still, "and we offer a written guarantee that any student

entering from that state this fall can go back to New York to practice when he graduates, providing the graduates of any other state can enter that state for practice when they graduate under the present law. This, of course, is dependent upon such New York students asking for such a guarantee at the time they enter our college.

"We have been informed that we could not be admitted into New York until two years from now," continues Dr. Still. "We are not sure about this, but we will not make any attempt until then. We have never applied for admission into New York State because of the conditions existing and the rulings of the Board varying so much from the State law. At least, this is one reason why no osteopathic school even attempts to live up to the real New York law."

## Further Plans Announced for the Laughlin School

I have felt for some time that I should make an effort to do something that would help to put osteopathy on a more permanent basis. What I have in mind is to build for the future. I have made a little money in the last four or five years and I believe I can make no better use of it than to devote it to advancing the interests of osteopathy. I expect to build slowly but with a view of permanency. So far as my personal interests are concerned, I would of course be better off not to go back into the school business.

My practice here runs considerably over \$100,000 a year in collections and, of course, I would be foolish to invest two or three hundred thousand in a school with the expectation of making a lot of money directly from it. On the other hand, I can continue with my practice, which will probably even get larger, and at the same time devote a part of my time to the management of the school.

It is my plan to employ a number of first

class men to help with the teaching; all, of course, will be full-time instructors. I will equip the school with good laboratories and accept only students who are well qualified for the work. I will finance the venture personally and there will be no four-flushers or dispensers of hot-air on the payroll, and no one will draw a cent of salary except those who earn it; but I expect to pay the teachers liberally for good service. There will be no pie-cutting and nobody rides free on the train. Furthermore, I will employ no one simply for his influence. It will be work with everybody, and only workers are wanted.

I believe I know enough about the school game to know how a school should be conducted. As you stated in your article in the last *OP*, I have built up one institution here single-handed, and I believe I can build another one. At least, I am not afraid to try. I have no unusual ability but I am what you would call a regular worker, on the job every

### Pediatrics Palmer

By Dr. W. A. Settle, Peterborough, Ontario  
[After the original design of K. C. B.]

IN THE WITNESS box \* \* \*  
OF A court room \* \* \*  
IN EDMONTON Alberta \* \* \*  
NOT SO VERY long ago \* \* \*  
SAT THE president \* \* \*  
OF A school that \* \* \*  
BEARS HIS own name \* \* \*  
AND STATED that "Pediatrics" \* \* \*  
WAS IN his understanding \* \* \*  
"THE STUDY of diseases \* \* \*  
OF the Feet" \* \* \*  
THAT IT was taught \* \* \*  
AT HIS school \* \* \*  
AS A part of \* \* \*  
C—orthopaedy. \* \* \*  
NOW, IF YOU will \* \* \*  
CONSULT a dictionary late \* \* \*  
YOU will see \* \* \*  
HE WAS a silly pate \* \* \*  
AND KNOW just why \* \* \*  
I SHOULD hate \* \* \*  
TO CALL myself \* \* \*  
A Palmer graduate.

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At the earliest possible moment after the throat condition comes under observation, the pharyngeal mucous membrane is thoroughly swabbed with cotton pledgets saturated with Dioxogen, diluted one part to three parts of warm water, the utmost care being taken to reach every portion of the throat, especially back of the fauces. The swabbing is done twice a day by the medical attendant. In addition, the patient is instructed to spray the throat every hour with Dioxogen, diluted one part to six parts of warm normal salt solution.

The non-toxic and non-irritating character of Dioxogen makes it possible to use it as freely and extensively as conditions may require. Dioxogen not only controls the local inflammatory process without delay, but may be relied on to prevent the development of complications and sequelae.

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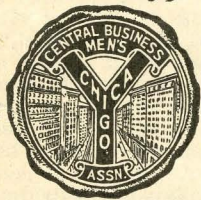
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## EFFICIENCY in PRACTICE MANAGEMENT

### The Efficient Osteopath

By Dr. C. C. Reid, Denver, Colo.

VI

#### Expenses Not Usually Considered or the High Cost of Inefficiency

(Continued)

##### PERSONAL APPEARANCE

Last month under the High Cost of Inefficiency, we talked about the office. This month we want to look into the office and observe the personal appearance of its occupants. The following are some of the things which are very expensive to a doctor and cause him to fall far below the mark in his collections.

*First, Lack of Dignified Bearing.* Some doctors sacrifice their dignity so much of the time at home and at other places that the habit sticks to them when they get into their office. Thoughtful and observant people, on entering the office of a physician who has no bearing of self-esteem and self-respect and self-confidence naturally lose the keen edge of their respect for the doctor, even though he may have great ability. I remember an incident of a big business man from Cleveland, Ohio, going to a celebrated bone-setter who had much ability along that particular line, but the bone-setter was an ex-rolling mill hand and had anything but a dignified and proper bearing. The business man was suffering with pain, and he took one look at the bone-setter and turned away in disgust.

*Second, Filthy Habits.* Many osteopaths habitually wear dirty house coats, barber coats or gowns. They let their hands go dirty and fingernails collect real estate under them. Uncleanly habits are necessarily very expensive ones.

*Third, Untidy, Cheap or Old Clothes.* A professional man who is supposed to stand for a high grade of living and an example of neatness and cleanliness, certainly does not make a good impression on his patrons with untidy, cheap, or old clothes. Trousers that are unpressed and bagged at the knee, cheap clothes that do not hold their shape or coloring, or old clothes that are threadbare showing signs of over-wear, are not in place on a dignified and prosperous doctor. The expense of neat clothes will be much more than offset by the difference in the impression which they produce on patrons.

*Fourth, Neglect to Make Toilet — Hands, Nails, Face and Hair.* This heading is covered somewhat by the preceding. However, these particular points need a little special attention. Some doctors fail to comb their hair sufficiently to keep it in shape. Some do not shave for two or three days at a time. It goes without saying that a man who is supposed to be a model of neatness should keep his hair combed and cut at least. He should shave every day, unless he is wearing a beard. In that case, it should be dressed every day. Hands should be kept neat and clean. The nails should be cut short, not long pointed according to some late style. Hang nails should be kept off the fingers, and after cleaning, the epidermis should be pushed back and the dirt scrupulously kept from under the nails.

*Fifth, Grouchy, Pouty, or Displeased Look.* Some doctors are so emotional and have such lack of control that at times they will allow a cloud to remain over their face which is quite noticeable to their patients. They seem to act as though somebody had injured them, and the patients are frequently impressed with the idea that the doctor is displeased in some

way with them. Patients and sick people are very susceptible to moods which the doctor might show, and nothing but the most pleasant exterior should be carried by the successful physician.

*Sixth, Lack of Frankness in the Eye and Voice.* An honest man can look you in the eye. One who is clear cut in his diagnosis and is honest in his intention need not waver or hesitate to look any one in the eye who comes in to see him. Honesty and frankness with the patient, even though the patient's condition is not always favorable, makes a better impression than the furtive eye and the hesitating voice.

*Seventh, Dirty Unkempt Appearance.* This heading is put in for a little emphasis. The general make-up of the doctor has much to do with the impression upon people coming in. If he is just taking a chew of tobacco out of his mouth, sensitive people coming in will be very deeply impressed in, of course, the wrong way.

*Eighth, Hair too Long.* This is a special heading because I have been impressed on visiting various osteopathic physicians, that they do not visit the barber often enough to keep their hair in the condition of a decent appearance. Reasonably long hair may be worn if it has proper care and dressing.

*Ninth, Shoes not Shined.* Particular people size you up by the small points, and it is attention to details that makes a successful practitioner. Observant people are apt to reason that a doctor who does not keep his shoes decent and properly shined will neglect many of the small details that should have his attention. One student body which I heard of, adopted the motto, "Black the heels of your shoes," meaning by that, pay attention to details in regard to your appearance.

*Tenth, Cheap Jewelry.* I question whether any jewelry has a place on the hands of an osteopathic physician during his working hours. Above all, no shoddy material of that kind should be worn on the hands or on the clothing. The impression cheap and abundant jewelry is bound to create, is certainly not good.

##### HELP

This general heading is of tremendous importance to the osteopathic physician. It is taken for granted that every progressive osteopath will have at least one office secretary. Some have two or three secretaries. I would say, however, that at least one is absolutely essential to the proper running of an efficient office. We will study the inefficiencies of the office secretaries under ten headings.

*First, No Help.* That is, the doctor is minus a secretary or office girl to help him manage the affairs of his practice. A good secretary is not a luxury, she is an office necessity. The absence of a secretary is an expensive denial.

*Second, a Coarse or Untidy Secretary.* A secretary of this type may do much to disturb the harmony of the office. The doctor should see that his secretary is properly trained on all the various points.

*Third, a Coquette Secretary.* A girl in the

office who is ready to get up a flirtation with most any man who comes in is not a desirable adjunct. If she will not take instruction along these lines, she should be dispensed with for one who will.

*Fourth, Inattentive and Irresponsible Help.* A secretary who will not pay attention to business and to whom you have to tell the same thing over and over is not one who can be made efficient. Blessed is the secretary who can assume responsibility and carry it through. An irresponsible individual anywhere in the world is not desirable and especially not in a doctor's office.

*Fifth, Ignorant, Stupid and Careless Help.* In order to handle people properly, an ignorant secretary or one who will do stupid things or be careless in not only her habits but in her dealings with people will often drive away patients.

*Sixth, the Secretary that Watches the Clock.* A secretary who never comes a moment too early but is usually from fifteen to thirty minutes late and then watches the clock at the end of the day ready to jump at the moment the working hours are over is sure not to be very much interested in the progress of the business.

*Seventh, Lack of a Sweet Disposition.* A girl in the doctor's office who is cheerful and kind to everybody, who carries a sweet disposition

constantly is a great asset. The lack of a good disposition in the secretary is a great drawback to her efficiency.

*Eighth, Unattractive in Personal Appearance.* The way the secretary dresses and carries herself has much to do with her value to the business. She should be impressed with the ideas of her personal appearance.

*Ninth, Mind Much on Things Connected with the Business.* A secretary whose mind is constantly on social engagements, on the opposite sex, or even so engrossed in such worthy things as church work, may be greatly hampered in her efficiency as a business girl. She should be impressed and should realize that as a business girl her mind must be much upon the line of work she is following.

*Tenth, Deceitful and Dishonest.* A secretary that will cover up mistakes, who is dishonest and insincere in her business life, who cannot be depended upon, who is disloyal to the business or the doctor, is a liability connected with any office and should be discharged as soon as found out. A physician should be very careful as to the kind of help he has about him. He should not take it for granted that a girl, however much ability she may have, is an efficient girl. He should take the time and trouble to instruct her along the lines of his desires in efficiency.

(To be continued.)

## Little Stories of the Clinic

By C. W. Young, D.O., Grand Junction, Colo.

STORY NO. 29

Thursday, May 19th, 1921, 1:30 p. m., Mr. A. came to my office and told me that Dr. S., the leading surgeon of Western Colorado, had told him that his wife had gall stones. She was the mother of a three weeks old baby, and had had severe acute abdominal pain on three occasions since the birth of the baby. Mr. A. said she had been suffering greatly for forty-eight hours, and that twenty-four hours previously she had been given morphine. He said the surgeon advised operation, if she did not at once improve. Mr. A. asked me if I could do anything for gallstones. "Yes," I said, "In nearly all cases. Only once in a while do cases diagnosed as gallstones require operation. Probably in a majority of such cases there are no stones at all. In some cases there is thickened bile only." We went at once to Mr. A.'s home. The morphine had relieved pain for several hours. But all of Thursday up to the time I came Mrs. A. was suffering most intensely. Her face was distorted with pain and her groanings of agony were heard constantly. Palpation revealed much tenderness over the stomach and the presence of considerable stomach contents. The gall bladder was distended and there was great tenderness over the gall duct, but there was no particular rigidity of muscles over the bladder and duct. There was great tenderness and rigidity of muscles in the lower dorsal area, especially over the ribs on both sides. With my whole hand with patient on the side I brought strong inhibitive pressure over first one side and then the other, with the middle of the hand over the tenth ribs about five inches from the spine. This brought some relief. I then brought pressure over the stomach and gall bladder, whereupon she began to vomit. I then had her drink three pints of warm water, which she vomited with some of the stomach contents, consisting of slimy mucous and a black tar-like substance. The afternoon treatment lasted for an hour, when patient said she felt less pain. I again resumed treatment at 7 p. m., and continued until 10 p. m., inhibiting, loosening the spine, encouraging vomiting, etc. Sometimes I would begin with my finger over the gall bladder and press along the entire gall duct, endeavoring

to press out all contents of bladder and duct. The patient recognized the importance of disgorging the stomach of its contents, and called for more and more water. She drank and vomited five quarts in all Thursday. Sometimes she thrust her finger in her throat to encourage the vomiting, and several times I put my fingers in her mouth and pressed firmly against the roof of the mouth with the backs of my fingers. Much mucous and black tar-like material came out in the evening. The black chunks had a bitter taste to the patient and a rancid odor. We pronounced them stale, thickened bile.

Mrs. A. had a very uncomfortable night, though the pain was much less than when I first saw her. Friday morning the treatments of Thursday were repeated, until vomiting ceased. Palpation then revealed an empty stomach and gall bladder and duct. But still Mrs. A. was suffering a good deal. Careful palpation revealed a fecal impaction in the transverse colon. I ordered a Noble's enema. On calling in the evening, I found the patient perfectly comfortable, with a smiling, happy face. She said while taking the enema all pain left her suddenly. Several hard chunks of feces came with the water. The mother was able to nurse the baby during all her sickness, though we found it necessary to supplement her milk with liberal amounts of Horlick's malted milk. When a month old, baby was two pounds heavier than at birth. The mother gradually increased her secretion of milk. Up to the day of writing (May 26th) there has been no recurrence of the terrible pain that came so near to driving the young mother on to the operating table. In fact, she has been very comfortable and happy. She continues to be free from a constipation that had been troubling her for years. Probably there had been a partial obstruction of the bowels for a long period.

Comment No. 1. This case illustrates again the necessity of making one's own diagnosis independent of any previous diagnosis by another physician.

Comment No. 2. My first diagnosis was thickened bile, with reverse peristalsis of such as found its way in the duodenum. This

could account for the great pain. And yet the impaction in the transverse colon, subsequently discovered, was probably producing marked obstruction in the bowel, and causing the greatest amount of trouble. This illustrates the need of constant alertness to modify or change a diagnosis once made.

Comment No. 3. The osteopathic manipulation was of great value in this case, but hydrotherapy accomplished the most, and I am sure ordinary common sense in the use of hydrotherapy would have led very few physicians to have used it as in this case. Certainly the writer has found the need of much study and clinical experience to become at all proficient in hydrotherapy.

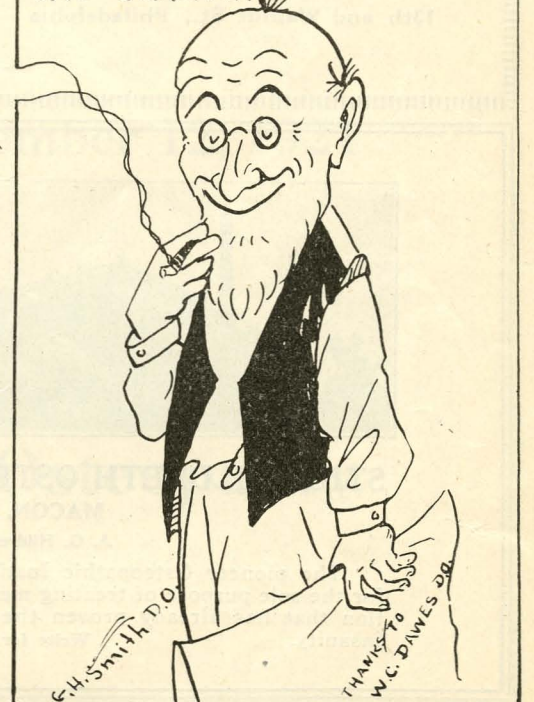
### Osteopathy by Divine Revelation

It is a custom in Berwickshire, England, and other parts of Great Britain, among women workers in the field, when their backs become much tired by bowing low down while singling turnips with short-shanked hoes, to lie down with their faces to the ground, allowing others to step across the lower part of their backs, on the lumbar region, with one foot, several times, until the pain of fatigue is removed.

Burton, in his "First Footsteps in East Africa," narrates a very similar custom in females who lead the camels, on feeling fatigued, and who "lie at full length, prone, stand upon each other's back, trampling and kneading, with their toes, and rise like giants refreshed." This custom is called "Jogsi" in Africa; in England it is "straightening the back."—Worcester (Mass.) Telegram.

## Hank Perkins He Sez: "By Heck, Do You Know -"

THAT MY BOY'S WIFE MARTHA  
HAD THAT THERE OST'OPATH  
WHEN HER 'LEVEN POUND  
BOY WAS BORN AN' EVERY-  
BODY SAYS HE LOOKS LIKE  
HIS GRANDPA



**SHOP TALK on MATTERS of  
PROFESSIONAL INTEREST**

**Suggest Endowing ASO**

I note Dr. E. R. Proctor's letter in June *OP* regarding Dr. George M. Laughlin's new school, and I think his attitude well taken. While we cannot but appreciate and honor Dr. Laughlin for the unselfishness and nobleness of his plan, yet one school is certainly enough for a little place like Kirksville. We fellows from ASO were painfully aware of the scarcity of good clinical material to be obtained there, and certainly another school there could but make the matter worse. I think the \$200,000 that Dr. Laughlin and associates propose to spend on the new school could be spent elsewhere to much better advantage.

How nice it would be to endow the ASO for a half million! With the \$200,000 as a starter, if we could buy out the present stockholders reasonably cheap, we certainly should have no trouble to raise \$300,000 more. Surely, out of the 6,000 or more ASO Alumni a modest 10%

would be willing to give \$500 apiece to endow their Alma Mater!

As long as our parent school is run as a private stock corporation (the same as the "Fountain Head" at Davenport), osteopathy cannot occupy the place in the public estimation that it should occupy, and the time has come when such a condition should be changed, and we all know it.

What we need is not more schools but better schools, and I for one, would view with regret the founding of a second school at Kirksville.—*Orval L. Kelley, D.O., Prescott, Ariz.*

**Dr. Crosswell on the Warpath!**

If you want to know the real osteopathic status today read over that Mayo address extract republished in *The OP* last month. Osteopathy is a joke in Mayo's eyes and not even a consideration—an already eliminated factor. Chiropractic is the bolshevik in the medical world and we osteopaths are of so little account—to hear Mayo tell it—as not to merit even credit for average intelligence! This Mayo article is warranted to reduce any egotism bump still remaining on the outside of the

osteopathic mind! I'd like to ask Mayo—as a fair-minded man—if he personally ever spent from a week to a month, or even one day, in any one of our good Class-A osteopathic schools, to see how much suggestion plays a part, and to find out how much of his "dam phule" accredited examination of osteopathy and its dislocations is to be found taught. Mayo evidently never heard of the difference between a dislocation and a subluxation. I wish some one would invite Mayo to spend a week at Kirksville—some of those D.O.'s who go to Rochester and fancy they are in good standing!—*Mary S. Crosswell, D.O., Farmington, Me.*

**A Patent Office for Medical Ideas**

I wonder if you noticed some time ago in the "Medical Record," that agitation for instituting a special medical board which should correspond to the patent office, the function of this medical board being to establish and protect the priority of ideas relating to medical subjects. Why haven't osteopaths a "patent office" to protect their priority to osteopathy and prosecute the pill-shooters for practicing osteopathy without a license? I wish we had more fighters in our profession. Osteopaths are like a lot of sheep, they pen themselves up into a corner where the wolves can eat them up! Now they are between the wolves and coyotes (kirocackers and medics) and oblivious to the fact—perhaps on account of a little immediate success, forgetting the future of osteopathy. Would that somebody might find the loose ends of the "drawing string" and pull the D.O.'s closer together to their not selfish, but mutual benefit.—*Modesticus, D.O., Kansas City, Mo.*

**We Made Our Own Limitations**

Why do people so many times go to the M.D. first and to the osteopath as a last resort? Because we taught them to. If in the beginning the course of instruction in our colleges had been a well-rounded one including surgery—in fact, on a par with the good medical schools, only replacing materia medica with osteopathy, as is practically the case at the present time, we would not be having to re-educate the public today and be fighting to break down restrictions which we ourselves created and permitted the law to place around us. If the public has any false ideas about us it is principally our own fault. The public generally sizes a thing up about right, sooner or later. We should be able and willing to do a general practice as the M.D. does and profit accordingly. I don't know whether the above thought amounts to much but it is what I had in mind this time, so I shot the piece.—*Orval L. Kelley, D.O., Prescott, Ariz.*

**To Prevent Pneumonia in the Newly Born**

In breech presentation and other cases where fluid or mucus has entered the bronchial tube during birth, a splendid precaution against pneumonia, in addition to the ordinary measures, is to lay the baby's head much lower than its feet and hips for the first few hours, using gravity as an adjunct.—*Harry G. Palmer, D.O., Compton, Calif.*

**Make Our Literature Simple**

It is my idea that the literature for the lay people borders too much on the technical, and should be put in simpler language. Concise and distinctive articles are read and heeded.—*Wm. F. Dickey, D.O., Santa Cruz, Calif.*

**Cabbage Leaves for Burns**

I have found that cabbage leaves pounded soft and applied to a burn or raw surface give almost instant relief. This is especially good for sunburn.—*Elizabeth Shupert, D.O., Rockford, Ill.*

**NOTICE**

**Dr. John H. Bailey**

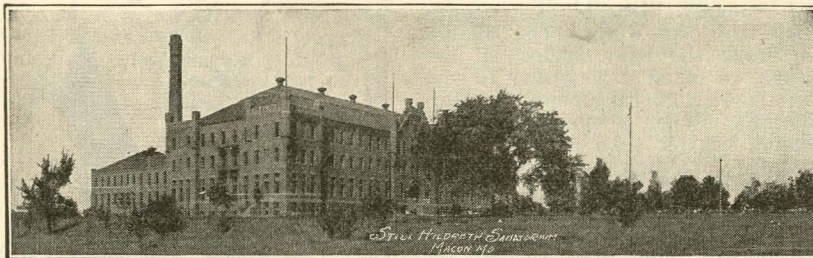
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## Feels Need of Professional Courtesy

Well, I wish to take my hat off to this osteopath, Bunting, as being the first one in my twenty years experience to ask me for an editorial! I believe in finding it, fixing it and then letting it alone. But, to be candid, if there were more life and courtesy among osteopaths, there would be less chiropractic. Well, I think it high time that the osteopaths got together and pulled the weeds and burned them.—*J. W. Kileter, D.O., Clifton Forge, Va.*

## Sanitation and Vitalization

Sanitation and vitalization are the two necessary principles to perpetually look after in order to obtain or maintain health and happiness.—*T. L. Lorbeer, D.O., Riverside, Calif.*

## That Apologetic Lesion

The osteopath who is always offering excuses for osteopathy as a profession owes the profession an apology for being a member of it.—*D. L. Clark, D.O., Denver, Colo.*

## Acknowledge Referred Cases

What osteopath is there who has not referred a patient to the osteopath in the neighboring city or, may be, across the continent? What osteopath has received a line from the doctor to whom he referred notifying him that the patient arrived, was under his care and thanking the doctor who possibly had referred a new convert to osteopathy and was anxious to know that the patients arrived in osteopathic hands? Let us all be more courteous and thank the doctor "who referred the patient" for his confidence. It will strengthen the ties between the practitioners and put one more pebble on the osteopathic beach.—*Samuel S. Wyland, D.O., Santa Rosa, Calif.*

## Widening Horizon

The field of the osteopath is enlarging and there is a real call for him to take an active interest in problems outside of his immediate osteopathic correction of lesions. By becoming a part of civic, educational and progressive movements he will enlarge his scope of work and personal influence.—*Philip S. Spence, D.O., Hartford, Conn.*

## Can You Cure Hives?

I would like to know if any one in the profession has worked out any more efficient method of treating hives (urticaria) than we find in our literature. So far as I have gone in the treatment of hives, the results have been very unsatisfactory. I hope I am the only one with such an experience, and I would like advice from some one that has been successful.—*G. E. Thompson, D.O., Peoria, Ill.*

## Advise Patients Properly

The people as a rule know very little about their bodies and proper care of them, and while the osteopathic physician is giving straight, old-line, A. T. Still osteopathy, he should improve his opportunities to give good advice, especially in hygiene and dietetics when the need is apparent.—*O. E. McFadon, D.O., Columbus, Ohio.*

## Don't Eat Unless—

My experience has convinced me that the one greatest rule for preventing illness and keeping at the highest point of physical efficiency, for patient or physician, is "Don't eat without a distinct desire for food." No difference how well one feels, this rule should be observed and the highest resistance to disease will be maintained. Try it.—*M. C. Hammer, D.O., New Castle, Ind.*

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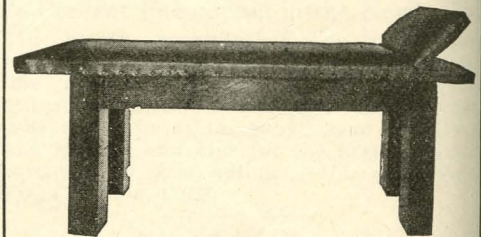
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## Everything of Value

The normalization of structures and functions of the body constitutes the practice of osteopathy. Measures employed may be mechanical, chemical, psychological — anything necessary in the case. Osteopathic practice uses any and every agency discovered to be of value. It's natural, common sense, rational.—*K. C. Ventress, D.O., Monmouth, Ill.*

## Doctors! Do You Believe in Preparedness?

It is a prevalent fact that a pandemic of fast and furious living seems to have affected a large portion of the modernized populace. Carelessness and recklessness are the chief symptoms, accidents are the sequelae. Hospitals are not always available, so the doctor has to meet them.

Have your emergency kit ready for all kinds of trauma and its resultant complications as hemorrhage, shock, etc. To add efficiency to your name, always take your emergency kit with you. Some time you may want it in a hurry and probably very unexpectedly. Two auto accidents recently, with cars turned over in a ditch, caused me to appreciate the emergency kit.—*W. L. Billings, D.O., D.P.H., Toledo, Ohio.*

## What Calibre?

The AMA by small-calibred thinking prevented Dr. A. T. Still from giving to the profession what was rightfully theirs in the correct manner. But we can easily get to be just as small.—*J. F. Roemer, D.O., Waukegan, Ill.*

## Unity and Punch

In one word, "Unity"! Stop-fighting among ourselves and get together on a constructive program. Stop patting the M.D. on the back and asking him to give us something while he smiles at us as a bunch of fools. Call a spade a spade, and say it out in the open so the public will know about it. Force the M.D. to carry his fight before the people. Come to realization of what the M.D. really has up his sleeve for us—obliteration!—Very sincerely yours for the ten-finger type of osteopathy.—*Wellington Dawes, D.O., Great Falls, Mont.*

## Hurrah for the Movies!

Twelve million people a day go to the movies. Talk about publicity! This beats all other ways. I am very much disappointed to find that all have not yet sent in their subscriptions for the osteopathic moving picture, "The Light That Did Not Fail." We must speed up the fund immediately, if we are to finish the picture in time for all to see it at the Cleveland convention. Don't wait any longer, Doctor. I am sure you don't want to let a few pay for a benefit all are to receive.

May I receive your check for at least \$10 by return mail? Talk it up with other osteopaths so we may realize this splendid accomplishment right away.—Yours for high-class publicity,—*R. K. S. Boston.*

## After John B.'s Henchman

RESOLVED that the Florida State Osteopathic Association in annual convention assembled strenuously protests against the onslaughts of the brewers, distillers and others who undermine the Volstead Code and seek the overthrow of the 18th amendment.

BE IT FURTHER RESOLVED that this association goes on record as being absolutely opposed to the contentions of these aforesaid interests that beer or alcohol in any form has any medicinal value.

BE IT FURTHER RESOLVED that a copy of this resolution be sent to the members of the House of Representatives and Senators from this state.

## More Than "Manips"

An osteopathic treatment is not a series of "manips," not a routine fingering up on side of the spine and down the other; it is specific adjustment of the spine, a concentration on definite areas, with a clean-cut purpose in view. This all implies careful examination at first, a definite diagnosis, a definite explanation of each and every symptom, on a basis of pathologic and the specific application of the osteopathic etiological viewpoint. Anything short of this is not osteopathy. This is real scientific "doctoring;" and incidently you save your own strength.—*John Martin Hiss, D.O., Columbus, Ohio.*

## Osteopathy Recognizes Food

Food is any substance which can be utilized in the living organism for structural or functional purposes. A complete food must contain all of the substances necessary to construct and maintain the activities of the tissues of the body. Such a food must contain water, mineral matter, nitrogenous matter, carbohydrates and fats, and, when taken in to the body, is capable of building up tissue, or by oxidation, of supplying heat. Because a substance or compound appears in the U. S. Pharmacopoea or is listed in Materia Medica does not prevent it from being a food and subject to utilization by the D.O.—*J. H. Hess, D.O., Mendon, Ill.*

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 Dr. Frank J. Stewart, *Skin and Venereal Diseases*  
 Dr. Herman R. Holmes, *Modern Methods of Treating Cancer*  
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There will also be instruction in Laboratory Diagnosis. Tuition in this course is free to Life Members of the Chicago College of Osteopathy Corporation. To others the tuition is \$60.00.

The regular Autumn Quarter of the College begins September 23rd, 1921. In the Training School for Nurses there is room for a few more candidates. The Training School course is two years in length. At least one year high school work, or its equivalent, is required for admission. Tuition is free and, after the probationary period of three months, student nurses are paid \$20.00 per month during the first year and \$25.00 per month during the second year. The student nurses receive board, room and laundry free, and two weeks' vacation each year.

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### When Patients Prescribe

Many patients attempt to direct the doctor *how* to treat them, and *when* to treat them. This is especially true of patients who have been under the care of other physicians and who have told them not to let any one treating them do so and so. This makes it difficult for the attending physician and certainly develops a lack of confidence in the patient toward other osteopaths. — *Frank H. Smith, D.O., Indianapolis, Ind.*

### Are you Satisfied?

No one is a good osteopath who is satisfied. Osteopathy demands growth and progress. Ceaseless activity is the price of progress. Better a member of mediocre ability who is doing his best than a genius who has done well, is satisfied and is on the down grade. — *W. E. Waldo, D.O., Seattle, Wash.*

### After the Deluge

The deluge of June 3rd knocked about all the sense out of the average Puebloan. My office is in the flood district, water being to ceilings of stores in the central block. But for me, the flood was not an unmixed evil, as it made me take a few days' vacation. It is about twenty-five days now since the flood, and we are still out of telephones, street cars and elevator service. Any one who can climb four flights of stairs doesn't need to see me very badly. You can count on me for a contribution later on—probably about the system of charging. My experience for a few months may be of assistance to some one else. So far, I thank God that I had the courage to re-organize my financial system the first of the year. No one in the profession here was lost, although they had me among the missing for three days. — *W. S. Maddux, D.O., Pueblo, Colo.*

### Is It Slipping?

"Say just what's in your mind." "Hit straight." Well, I'm thinking about our school out here, of which, by the way, I am a two-year post graduate. Looks like it were going medical. I'm told the old A No. 1 teachers (osteopathic) have quit, or are quitting. It's now called Medical-Osteopathic. Medical first. The other day a member of the faculty, a classmate of mine, fraternity brother, lodge brother, called on a member of my own family and left some pills. I sent a former member of the faculty out and he gave him a treatment. It looks like the mixed board has raised hell in California, and perhaps that's what the medicos aimed at. Anyhow, those who hold P. & S. licenses, or a great many of them, like to resort to Dr. Pill. And some of them, I know for a fact, for I was in class with them, failed to get the A. T. Still viewpoint as they went along. Thus, you see, a P. & S. license don't mean much—not in California, at least, not osteopathically. — *W. Luther Holt, D.O., Los Angeles, California.*

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### Rest in Neuritis

When a patient comes to me presenting symptoms of neuritis I immediately sit down and attempt to enlighten the patient as to the nature of his condition and the part he must play if he is to be cured. The physician loses nothing and to my mind he gains a great deal if he takes time to explain the pathology and how Nature is going to cure the existing condition.

In brachial neuritis I have found lesions most frequently from the first to fourth dorsal, combined oftentimes with rib lesions. I emphasize the need of absolute rest of the part, for I believe that this is two-thirds of the cure, with all due respect to the necessary adjustments. In some cases I have found it beneficial and even necessary to put the arm in a sling for a few days.

I treat the lesions specifically, giving brief treatments and, if possible, I see the patient every day until the nocturnal pain ceases. Rubbing or massaging the part should be absolutely forbidden. — *E. Howard Bowman, D.O., Ridgway, Pa.*

### One Hour of Treatment

Two ladies called at my office the other day. The first question asked was: "How long a treatment do you give?" My reply was: "I never watch the clock while treating. The average time is twenty minutes. Depends upon 1001 conditions." "Why, that's ridiculous," she replied. "My doctor in St. Paul treats me for a whole hour and only charges \$2, and my, he did me so much good!" (No doubt he did.) Can you beat it? Of course they never came back—I thought, *one-hour* osteopaths had all passed away by this time. — *O. A. Hub, D.O., Ocean Park, Calif.*

### More Careful Diagnosis

After the usual examination do a microscopical of the urine, stomach contents and blood. Take the blood pressure and know its significance. Hun's Diagnosis of Nervous Diseases will clear up many obscure cases. — *A. E. MacGilliard, D.O., Granite City, Ill.*

### More Physical Diagnosis

My best thought of the day is the need of more accurate physical diagnosis, particularly in relation to incipient T. B. This means constant daily use of the stethoscope and availing ourselves of every opportunity to study these cases. We are so satisfied that we are prone to pat ourselves on the back until we have worn our right coat sleeve shiny. Let's get to work on diagnosis. — *E. Scamman, D.O., Boston, Massachusetts.*

## *When Advising Prospective Osteopaths as to the Choice of a College*

*Remember*— That Los Angeles and vicinity not only has an exceptionally large number of Osteopaths who have established national reputations as Osteopathic Physicians and teachers of Osteopathy and that the interest in and devotion to Osteopathy on the part of these individuals makes possible the strong faculty of the College of Osteopathic Physicians and Surgeons.

That this institution is greatly strengthening its teaching staff in the fundamental sciences by the addition of several carefully selected full time instructors who have at their disposal exceptionally good laboratory facilities.

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Entered as second-class matter April 7th, 1903, at the Postoffice at Chicago, Illinois, under the Act of March 3d, 1879.

### EDITORIAL

Fairness, Freedom, Fearlessness

"Hew to the line, let chips fall where they will."

Vol. XL July, 1921 No. 1

#### HOW TO GET YOUR MEETING REPORTED

Dr. W. G. Sutherland, got a column and a half story of the Southern Minnesota Osteopathic Association meeting at Mankato in his newspaper May 7th. He gives this recipe for the way to do it:

Copy prepared a week before the session. A personal visit to the Editor's holy sanctum, early in the morning before the convention; copy placed on his busy desk; his operating shears placed on top of copy; his blue pencil placed across the shears. Editor elsewhere—at breakfast. Nobody else, (including the boy and devil) around. Copy went through without a "scratch." Nuf said.—Sutherland.

#### A WOMAN'S ESTIMATE OF WOMAN

When Dr. Roberta Wimer-Ford talks publicly we have long been accustomed to expect something worth while. We wonder that she doesn't go to congress from her progressive state! Before the National Federation of Business and Professional Women's Clubs Dr. Wimer-Ford recently expressed this idea about the feminist movement:

"The successful business woman is well groomed, calm, cool, impersonal, poised, alert, self-confident, cheerful, gracious and does not expect or want men's attentions, all of which has come about because of her freedom from sex consciousness.

"This freedom of sex consciousness is perhaps the greatest asset the business and professional woman has acquired. Business and professional women always work for the common good, not for themselves alone, as men have done for countless ages. Our thirty-three women legislators in Washington State are living Lincoln's doctrine, 'Let us have faith that right makes might,' and they are doing their utmost to better conditions. Brains are necessary to success. Universal recognition eventually will be given women."

Well spoken, Dr. Wimer-Ford.

#### WHAT THE WHOLE PROFESSION IS THINKING ABOUT

In this issue's "Shop Talk" there is presented a very good symposium of short signed editorials by a multitude of the profession which constitutes a really fair barometer of just what the profession is thinking about. You may not realize the significance of this department until it is pointed out to you, but that is exactly what it is—a cross-section through the mind of the profession; a slide, as it were, of what is on the mind of the profession; a faithful portrayal of the interests and problems which engage the sober thinking of the profession. This has real value just because it is the outspoken thought of the multitude. Every fellow has uttered the one thing that was closest

to his heart and most in his thoughts at the moment of writing it.

How do we know? Because each was asked to speak to the subject of most interest to him. Each was asked to choose his own subject without suggestions from us. So, the response tells us accurately just what is on the profession's mind at this time.

Furthermore, as we have indicated, it is a representative poll of the whole profession's thinking. What is our ground for saying this? Because, besides asking all our "500 Associate Editors of The OP" to contribute to this symposium, we have also extended the invitation to every other osteopath whose name is on our mailing list. Both classes of contributions are included in this department this month. The same series has also been running through several months past. Everybody in the profession, then, has been asked to express his one biggest idea in this department, and this compilation of several hundred contributions includes all such responses as have been re-

ceived by us in recent months up to the moment of going to press.

The thinker in the profession will derive much profit, we believe, from taking counsel with the multitude in this fashion. Hitherto it has been more the habit of the profession and its publications to pay marked attention to a few chosen leaders and spokesmen of osteopathy; but we have become convinced that too little attention has been given to the opinions of the average man and woman in the ranks. The average osteopath has opinions, professional consciousness and inspirations, all three, and he can express them, too. If you doubt it, take a look at "Shop Talk" this month—and every month in the year.

We hope The OP's experiment in thus democratizing its editorial conduct will be voted to hold real value for the profession, and that this excellent showing of new contributors may encourage still others who have not yet ventured to go on record to embrace the opportunity we afford them under our new policy and write their one best idea for these pages.

## Waldoettes

If Practicing Osteopathy—

You might as well believe in it, for if you don't, how do you expect to sell the patient?

Believe in yourself, because you know as much as the other fellow, or can by putting forth effort.

Cure yourself of MENTAL and PHYSICAL CONSTIPATION; one is as bad as the other, and both keep you from being mentally alert.

Don't fool yourself, because if you do, you will begin to fool others.

Your dress, the appearance of your office and your actions reflect exactly your mental attitude.

Osteopathy is easy to practice, but you make hard work of it and then tell the world, so your bump of self-pity will grow thereby.

Teach your patients how to live, and follow your own teachings and have the greatest of assets—Good Health.

Decide what goal you wish to attain, lay out your plans accordingly and work to that end. If you think you are down and out, you sure are!

After you decide what you can do for a given case, have courage enough to tell the patient. Stalling is one of the profession's greatest weaknesses.

Charge what you feel your services are worth. If you feel they are worth a dollar, that is all they are worth; but if you decide that you must be compensated for services rendered, you can get what you ask for.

You complain constantly about the public not knowing or appreciating osteopathy, yet you make no effort to educate them by distributing osteopathic literature.

Beware of joining your national, state and local society. You have prided yourself so long on being peculiar and independent, and this is one way of fooling yourself.

Think—most of us fool ourselves into thinking that we think.

—Wm. E. Waldo, D.O., President AOA, Seattle, Washington.

## A Medical Author's Opinions of Medical Science and Osteopathy

A. C. Tebeau, D.O., Fayetteville, N. C.

EDITOR, OP: I am sending the following article which is mostly a compilation of quotations from a book, thinking it might be of sufficient interest to justify publication. However, I insert an occasional comment of my own within brackets.

While looking over a few volumes recently which I had not seen for some time, I picked up a book called "A Treatise on Medical Practice, Based on the Principles and Therapeutic Applications of The Physical Modes and Methods of Treatment (Non-Medicinal Therapy), by Otto Juettner, A.M., Sc. M., Ph. D., M.D., author of "Modern Physio-Therapy, etc., fellow of a great number of medical societies, etc., published by A. L. Chatterton Co., New York, 1916. It contains a few passages which were interesting to me, and so I am passing them along through The OP, thinking that some of you might also find them interesting.

I quote first from the preface to the book as follows:

"Physical therapy admits of no serious differences of therapeutic opinion. No greater praise could be bestowed upon it than the tacit readiness of serious-minded men of all schools who accept it as the common ground or platform to stand upon for substantial clinical results without sacrificing even one iota of sectional fancies or foibles."

From the "Introduction" I quote the following:

"If we look about and observe the work of physicians in adapting means and methods to the task of curing disease, or rather, of restoring or trying to restore diseased bodies, the first fact which impresses itself with irresistible logic upon the eye and mind of the beholder is the immeasurable confusion of ideas and conclusions among those who are engaged in the study and practice of the art and science of medicine. There is no unity of thought, no congruity of conclusions, no agreement as to the proper means to be employed, although there is, as far as outward appearances are concerned, an approximate oneness of purpose. The cure of disease, the relief of pain, the restoration of health embody the object of the physician's work. It has been the object from times immemorial. Many centuries have come and gone. Man knows incomparably more about biology in its vast sense, about physics, about chemistry, about physiology, about all the laws of life of the individual as well as of the species than did the fathers of medicine in Egypt and Greece two and three thousand years ago. He knows vastly more than he believes concerning the theory of preserving and

## Some Doctor's Offices

## VII

## The Rough-Neck

John Barr, D. O.

Three or four years ago, the touring roads of the western part of the United States were not the best in the world. When you combine this fact with another, to-wit: that the spring suspension of the car I happened to be covering the ground with, was of the type politely called stiff, it is not to be wondered at that in a little, barren town somewhere west of Reno I hunted up the local D.O., not primarily to pass the time of day but to secure a treatment for a lame back that threatened to quit the journey before the rest of me did.

I found my D.O. In a little, barren office on the little barren main street of this wind and dust swept western town, I found him. But his cordiality made up for all the apparent absence of hospitality. He had the smile and handclasp and wide open welcome that has made this portion of the country famous. Shortly, I told him what I wanted and he forthwith led me into his treating chamber. Give him one whirl at that back and he would fix it for a long time to come, he said. I told him he would have to, for there was still a long way to go with few stops to be made and the stiff springs went all the way.

\* \* \*

As in the old-time novels, passage of time was indicated by the liberal use of "stars," so let the time occupied by that treatment be here indicated. As a matter of fact, there is a certain felicity of expression in the employment of those stars in this particular instance. Now I never saw stars with my back but if I could have, I would have.

Back at school, I lived in a fraternity house which also housed one of these beefy individuals who do things by-might and main. One day an instructor in technic threw out the suggestion that better movements might be executed if proper use of the body weight were made.

thoughts and actions but tries to locate the factors which make the appearance and development of certain phenomena possible under certain conditions. Similar statements might be made in connection with the growing popularity of certain laboratory methods which have a restricted field of clinical usefulness, but out of all proportion to the number of conditions and cases subjected to this form of experimentation. In this wise the therapeutic paucity of internal medication has in more ways than one driven even thoughtful men into fields of action which can hardly be differentiated from the pastures of the charlatan. The laboratory is the place for research and experimentation. Sera and vaccines have no place at the bedside or in the office unless the weight of truth and knowledge justifies their employment therapeutically, not experimentally. To my mind, all therapeutic fancies and vagaries have an economic origin. It is an unmistakable phase in the struggle for the survival of the fittest through which our profession is passing.

"This is my plea for the adoption of physical therapeutic methods as a part and parcel of the therapeutic and mental equipment of the practitioner. They are not new. Hydro-ther-

My beefy classmate was the only one in the group that fully digested that remark and thereafter, he certainly gave a very "specific" treatment. Now there is a little joker in the statement above credited to that instructor in technic and that joker lies in the word, "proper."

Both my beefy friend and this western operator certainly caught the gist of the idea when told to make use of the body weight. But I am sure, because my back tells me so, that the latter especially, never fully comprehended the term "proper."

Be that as it may, from that town on, the roads got continually worse and the springs progressively stiffer. Now when you take into consideration that we finished this trip over the famous highways of California and that we oiled and massaged those springs daily, that does not sound just right. But that is the way my back reported to me and I guess the reports would still be coming in if I had not found in Los Angeles a man by the name of Forbes. Now everybody knows that Forbes is a genius at "finding, fixing and leaving alone."

He did all three to me. He left me alone because I left him a week later, and he fixed that back because the roads going out of California were greatly improved over those going in, and we happened to go back the same way we went in. He found something, too. Something not in the books and if ever I run across that D.O. who used to live somewhat west of Reno, I shall consider it my duty to inform him that in a manner of speaking, he should be famous for he has produced what might be called an unknown lesion.

Now the title of this diatribe might be called a little rough, and yet it just exactly fits at least one D.O. that I know. His would be a fine treatment if only he made a proper study of the word proper.

apy which was employed and lauded by Ambrose Pare is not today receiving the recognition which it deserves, considering that of all therapeutic methods, old and new, hydro-therapy comes first, because it is the most scientific and effective of any. That there are many physicians who know nothing about it, is one of the strange facts which we encounter in the study and analysis of the scientific and economic fitness of the profession. The same might be said about other branches of physiotherapy."

On all that I have quoted thus far, surely no comment is necessary from me. "He who runs, may read." I cannot remember having read or heard a more sweeping indictment of internal medication anywhere. Certainly we could not possibly say anything worse about it than the author quoted has said. And now, in view of all that he has to say along that line it is interesting to note what he has to say regarding our own beloved profession. In the chapter on Mechano-Therapy he has this to say of osteopathy:

"Osteopathy is a system of movements by which displacements of bony structures are to be corrected, the supposition being that "all diseases are due to definite lesions consisting

restoring health. In spite of all this progress the vital and essential questions which are at the very bottom of the physician's work are as much under dispute as they ever were in the past, perhaps more. No two physicians agree, no two schools are in accord, and above and around them is the maze of skepticism which enshrouds those who are frank in admitting that they do not know any more than our fathers did in the days gone by. Therapeutics is the one branch of medicine which means everything to the clientele of the physician and has—after as before—usurped the work of the ever-ready and ever-dependable vis medicatrix naturae. The element of faith and superstition still hovers about the materia medica as it did in the days of old. The guess work of internal medication is the same today as it was in the days of Galen and Averroes. The regular school of medicine has long ago recognized these facts and is accomodating itself to the situation in keeping with the critical talent and receptive faculty of the individual physician."

The author then quotes Mephisto's caustic reference to the medical practice with the remark that it seems to be as true and apt today as it was supposed to be in the time of Goethe:

The work of doctors is not hard to grasp;  
They rack their brains, and study high and low;  
Yet in the end the sick get well or gasp  
Their last, if Mother Nature wills it so.

Then comes this gem:

"A plea for the rational application of the so-called physical therapeutic methods can be reasonably based upon the therapeutic and economic disappointments of internal medication. It would be a waste of time and a needless and tiresome repetition of things familiar to every one to say even one word about the questionable position occupied by so-called internal medication as a curative method. The number of ideas and theories concerning it is legion. This is proof enough to show the loosely experimental character of the subject. Adding thereto the relative insufficiency of the individual mind, we can readily see why the subject is uncertain and hazardous at best.

"To treat the sick individual is one thing; to cure the disease is another. In the one case the drugs keep the patient more or less expectantly and pleasantly occupied, in the other the natural reparative power of the body (vis medicatrix naturae) cures the disease. But, after all, it is needless to dilate upon these points which collectively are and have been the bone of contention between schools of medicine from times immemorial. They have all had their day.

"The argument has not added one iota of truth to our knowledge and no grain of strength to the health of our sick fellowman.

"The economic factor is more vital and, therefore, of greater consequence. People have been weaned away from drugs. How this happened, is of no import. It suffices to know that it happened. All kinds and varieties of drugless cults have taken the place of drug-methods with many people. This means an economic loss too serious to be disregarded.

"That the inroads of unfair competition have left their mark even on the scientific character of medical practice cannot be gainsaid. Surgery has grown beyond its legitimate boundaries. Fads and fancies have swayed the surgical logic of the profession in more ways than one. It would be folly not to recognize the fact that the tendency toward surgical overwork has been partly created by the law of economic necessity which has sought new fields to take the place of territory lost."

Is not the foregoing all rather rich? I'll say it is. Now, note this:

"The wholesale removal of ovaries and appendices which came to us like the visitation of an epidemic a decade or two ago was surely not a purely accidental occurrence. All these facts furnish material for the medical historian who observes not only the evolution of medical

of bony displacements and that treatment and cure must necessarily consist in and follow removal of the cause."

Please note that the author quotes his own definition of osteopathy. I wonder where he found it? I do not recall ever having seen that particular definition before.

The most interesting part of the whole book, however, in so far as it relates to us, is his comment on osteopathy, and is found in the following rather long explanation of the different modes of mechano-therapy.

"For practical purposes the different modes of movement or manipulation can be classified in a much more simple and convenient manner. Since ordinary exercises is to all intents and purposes a part of the so-called Swedish movements, it can practically be left out of consideration as a special form of mechano-therapy. Bone-setting is a motely and empirical mixture of massage and Swedish movements, practiced by men without technical knowledge, but endowed with a wonderfully fine sense of touch and a knack of manipulation. Orthopedics, in as far as it is related to manipulative procedures, is also a compound of massage and Swedish movements and, therefore, does not represent a distinct subdivision."

"Osteopathy was included for the sake of completeness. Being a drugless method or system and having the charm of novelty. [I wonder when the novelty will wear off?] It has gained unprecedented popularity in all parts of the country. Neither its theories nor the practical results achieved by their application justify the prominence which it has achieved recently. Nothing can be accomplished by an osteopath that cannot be done by an expert Swedish masseur. [What about that, readers?] Those who extol osteopathy as a new system of practice are attracted by the glamour of novelty and, in a measure, by its suggestive influence. Osteopathy, in its approved form, cannot live because its pathology is not sound and its range of practical application is limited. The number of osteopaths who are including the other physio-therapeutic methods is constantly growing, thus furnishing a mute but eloquent proof for the clinical insufficiency of the osteopathic creed. [Nothing like seeing ourselves as others see us!] The success of osteopathy, however, shows the drift of the times in the direction of drugless methods. Osteopathy has given a new and powerful impetus to the study of anatomy and physiology and to the analysis of the intentions of Nature as expressed in the sciences of hygiene and dietetics. [Well, it seems that we have accomplished something, after all.] In this respect the announcement of the osteopathic creed was of historical moment. Osteopathy has fulfilled its mission. [Judging from some of the things I have read in our journals in recent years, I think some of our men must agree with that last statement.]

"It served as an auxiliary wedge in the interests of an incomparably greater cause, to-wit: physio-therapeutic medication. Osteopathy as a system cannot and will not live. [Seems to me I have also heard that from sources within our own ranks.] Even now the evidences of decay are too plain to be ignored. The well-meaning and intelligent osteopaths who have a good knowledge of the essential branches of medicine and are correspondingly well-posted in the collateral natural sciences may continue under the name of osteopaths, but they will, to all intents and purposes, be practitioners of modern, i. e., physiological medicine."

Many thoughts occur to me in the way of comment on all the above, but, for the present, I shall content myself with a single quotation from St. Paul, namely:

"Think on these things."

## HELPFUL HINTS *in* DIAGNOSIS REVEALED *by* ADVANCED DENTISTRY

### Talks to Osteopaths by a Dentist

By M. D. K. Bemmer, D. D. S., formerly Editor, The American Dentist, Chicago

It is strange how often we overlook some very simple fact; how extremely obvious phenomena escape our notice, that is, obvious after we have stumbled upon them as they were brought to our attention by some great original mind.

No better illustration of this can be found than the theory of immunity and the natural body resistance against disease as first enunciated by Dr. A. T. Still. Mankind, from time immemorial, knew that certain diseases conferred permanent immunity. It also knew that many people get well without any aid from either drugs or doctors and yet, until Dr. Still came, it had not occurred to anybody that the permanent immunity, the healing of wounds, and "the getting well" are part of the same process, and that the inherent defenses existing within the bodies of all organic life are, in other words, "natural immunity."

A similar illustration is the clear connection that exists between the condition of the mouth and the general health. This is now an accepted fact, and from our present point of view is likewise quite obvious. The teeth are embedded in the highly vascular cancellous bone of the jaw. They are invested at the neck with soft tissue—the gums. Through the center of each tooth there are one or more canals into which enter arteries and nerves, thus connecting them intimately with the arterial and nervous systems of the entire body, and yet it is only within the last ten years that any attention has been paid to the conditions in the oral cavity. Previous to that time neither the medical man nor the osteopath took the slightest interest in the teeth of patients. The teeth were looked upon as merely a mechanical apparatus which Nature had built for the purpose of mastication, and even the dentist shared this view. The greatest pride of the dental profession in those days was "how many roots could be saved." The fact that some of those roots were diseased, that pus could be squeezed from the gums around them, did not make any difference.

All of us engaged in the healing art then, have simply failed to see the obvious, have failed to realize that the teeth are an integral part of the anatomy, and that if they harbour disease or infection the rest of the body must of necessity be affected. Fortunately, this is history. The majority of men who treat disease are now pretty well aware that ill health is often the result of infection at the gum margin (so-called pyorrhoea) or at the apex (root end) of a tooth. Of course there are a few yet who have not grasped these facts. So much the worse for those few.

#### Affinity Between Osteopaths and Dentists

At a glance it would seem there is hardly anything in common between a dentist and an osteopath, yet, upon reflection these two professions are very closely related; indeed, it may be said that they are analogous. Dentistry, like osteopathy, does not depend on drugs or medicine for its cures, but on the mechanical removal of the cause.

Dental decay or caries, the disease a dentist is most frequently called upon to treat, cannot be healed by the application of extracts or tinctures. The treatment is simply mechanical excavation of the disintegrated tooth substance, and the lost part restored with an amalgam filling or a gold inlay.

It is true, of course, that the dentist does

use drugs, that his cabinet is full of small bottles containing different medicines, but he does not expect any cure from those drugs, and he does not apply them with that purpose in view. For example, in simple toothache a dentist may place in the cavity one of the essential oils such as cloves, or he may choose a coal-tar derivative like carbolic acid or creosote. These, however, are merely sedatives, i. e., temporary pain relievers, and they are very much akin to the anesthetic, like cocain or chloroform, which the osteopath surgeon does not hesitate to inject or administer.

In case of an incipient abscess a dentist will often apply iodine alone or combined with aconite and chloroform. Here again, his aim is not to cure the abscess by means of these applications, but merely as a counter irritant, so that Nature will send more blood to the part affected, really equivalent to digital massage which cannot be used in this instance on account of the tenderness which is almost always present, because, like the osteopath, he depends on Nature's healing remedies carried in the circulation.

In addition to sedatives and counter irritants, dentists employ a great many antiseptics; but we must bear in mind that they do not apply them to soft tissues which have their own natural resistance; but to non-vital dentine cotton saturated with formalin or some chlorine derivative may be put into a root canal to effect sterility. And when that is accomplished the root is filled mechanically with a plug of gutta percha. An osteopathic surgeon before making an incision may wash the surface with alcohol or bichloride, but he is not using drugs in the medical sense. Even in pyorrhoea, which is a disease of the soft tissues of the gums, our treatment is strictly mechanical. The polishing of the necks of the teeth and the removal of whatever deposit has accumulated on the roots, aided by massage of the gums and frequent flushing of the mouth with a normal salt solution, will arrest any case of pyorrhoea which is not too far advanced. Here also if drugs are applied it is for the counter-irritating effect.

I repeat the dentist and the osteopath are very closely related, and mutual co-operation will enable both professions to serve their patients better and more efficiently.

(To be continued)

#### Half our Troubles Imaginary

One-half of the profession's troubles are mental, and I propose to continue treating them from that standpoint.—William E. Waldo, D.O., Seattle, Wash.

#### Carry War Into Enemy's Country

If we would put the AMA on the defense occasionally, instead of sitting back and howling, the battle would soon be won, for the public is with us! We have good osteopathic laws in some states but they are daily being shot full of holes by the AMA, so that they now look like a fishnet. If the entire profession does not, or can not see this, then for the "love of Mike" let us get those that do see it together. We are continually on the defense (but we don't even put up a decent fight), while if we would start the offensive, we could win in a walk. It's high time something was done and I am ready for one.—F. E. Wilcox, D.O., Hanover Square, Pa.

## OSTEOPATHS in the LIMELIGHT

### Dr. D. E. Pearl Has Distinguished Himself in Osteopathy

[From the Reedley (California) Ledger]

Dr. D. E. Pearl, a former Reedley boy, has distinguished himself in his chosen profession, osteopathy. For some years past he has been osteopathic technician for the McManis Table Co. of Kirksville, Mo. So assiduously has he devoted his time to his work that now he is able to render services to the McManis Table Co. that are indispensable.



Dr. J. V. McManis, president of the company, who recently visited Reedley, said that Dr. Pearl has so thoroughly perfected his particular line of work in connection with the company that Dr. Pearl was literally an integral part of the organization.

So thoroughly has Dr. Pearl perfected himself in the methods used by osteopathic physicians and so highly skilled has he become in the technique of manual manipulations that the Des Moines Still College of Osteopathy, Des Moines, Iowa, has placed him on the faculty where he will devote a certain amount of time each year teaching advanced methods in manipulative therapeutics.

Dr. Pearl is the son of Mr. and Mrs. J. H. Pearl, and about six years ago left Reedley for the east. Since then he has served in the army and has been here a few times visiting his folks.

\* \* \*

This praise is no stronger than Dr. Pearl deserves. His strong point is his technique, and they say he's a wizard when it comes to that. He is alert and chuck full of pep and is a believer in old-fashioned osteopathy—the kind that finds it, fixes it and leaves it alone.

## TECHNIQUE

### Modified Trendelenberg Position

By J. V. McManis, D. O., Kirksville, Mo.

The modified Trendelenberg position as used on the McManis table, is a valuable and important position to have the patient assume in treating certain conditions often encountered. To obtain this position lower the middle leaf of the table at the edge toward the head section. Place the gyn crutches in position. Patient on back with knees over the gyn crutches. Hips well forward. Raise head section of table to highest point. In case it is not necessary to have the hips at the elevation the maximum height the head section affords, any angle may be obtained. This section of the table may be raised at an angle from one to forty-five degrees.

This modified Trendelenberg position, which has always been desirable in the treatment of abdominal and pelvic ptosis, has not been used as universally as the knee chest position, due to the fact, no doubt, that means for placing the patient in the Trendelenberg were not available. However, with the McManis in your office, this difficulty has been removed.

The knee-chest position does not permit the freedom of movement of the abdominal and pelvic contents or organs nor is it as comfortable to the patient. This is because in the knee-chest position the effort on the part of the patient to maintain balance will cause a concentration of the abdominal muscles. This interferes with the replacing of the organs which are prolapsed. By making use of the modified McManis Trendelenberg position the element of gravity is made use of to the fullest extent with a minimum of discomfort to the patient. The muscles of the abdomen are relaxed and the abdominal contents can be returned to their normal position without interference. When this has been accomplished it is advisable to let the patient remain in position several minutes in order that the replaced viscera and the supporting tissues may become accustomed to the old or correct position.

When lifting the pelvic contents forward

with the patient in the knee-chest position it is necessary for the abdominal contents to be replaced first, to be effective, as they offer resistance to the treatment both in replacing and maintaining position. By the modified Trendelenberg position the abdominal contents are replaced first and the pelvic contents can be treated without interference.

In the treatment of constipation and in passive congestion of the pelvis the Trendelenberg position aids in the drainage of these parts and as a result increased circulation ensues. This is particularly effective in prolapse of the caecum and pelvic colon. A normal circulation of blood is of first importance in normal functioning of a part.

The men and women using McManis tables should make use of the Trendelenberg position which their table affords. It adds effectiveness to your treatment and is very much more comfortable to the patient.

## What Is a Chiropractor?

By an Indiana Osteopath

There has been much said about defining chiropractic and as to whether or not laws should be enacted recognizing them. Now, let me preface what I have to say by stating that I know what is taught in two chiropractic schools. I have associated with men of a number of other schools. I have been a studious examiner of Taban's, "technic and practice."

Now, to be exact, there is no telling what a chiropractor is. There are no two of these schools that teach the same, and a great number of chiropractors have very little knowledge of diagnosis. Some of them give a very passive treatment "adjustment?" Others are rough in the extreme, and I happen to know a few whom I consider expert osteopathic operators. One of the best I have ever seen comes from some little school in Michigan. He uses a table which can be released (under the patient) in very small sections, according to the position of the spine he is working on. The table is made rigid for palpating, then released for "adjustment." He is not rough but keeps pounding away. He knows what he is doing and knows how to do it, and he will handle ten or twelve people an hour—and he has them to handle, too. Now I know he is not a physician. He never looks at a tonsil. He never touches a patient excepting at the spine, but he is a spinal operator and gets results.

The "National School" of Chicago, teaches osteopathy almost entirely, so far as technic is concerned. The "Ross School" uses a table as ridiculous as the "National" and one of their treatments is a crime. And the poorest of all

of them, in my judgment is the "Fountain Head."

Most of these people are telling the public that "osteopathy is obsolete," "chiropractic has superceded it," etc. You really can not blame these dupes. That is what they have been taught and they know no better. They are very conceited. That also is on account of their lack of training. But you can not drive people away from them, and to educate all the people, never; it can't be done. The "chiro" has come to stay.

Now what shall we do with him?

I think it is common sense to create laws regulating the practice every time they ask for admission in any State. The M.D.'s are there smiling inefficiency. The "chiro" are coming by the hundreds, and the only way to standardize them is to create a standard, and the longer we retard such action the more time there is in which any one can practice chiropractic or claim to do so, for there is usually no law to stop him. Again, the M.D. is little more friendly to the osteopath than he is to the chiropractor. He is against everything that detracts from his power, and he is ever howling for more power among the perfectly gullible people.

Personally, I would rather place my life in the hands of the better chiropractors than any M.D. living. Let us not be foolish enough to fight "chiro" recognition. Give them laws, create a real standard. That is the only way to curtail the chiropractic influx.

[I do not sign this article for reasons which are real reasons to me locally, whether they are to any one else or not.]

## The Tendency of the Times

By Chas. A. Champlin, D.O., Hope, Ark.

The tendency during the past eight or ten years has been to higher standards of osteopathy, more stringent State laws and fewer osteopathic students enrolling in our schools. Is the relation of these facts just a coincidence, or is there a significance worthy of deep consideration and thought on the part of the profession? I am prone to take the latter view, especially as regards the more stringent State laws.

The medical profession can well employ this method of hedging as their profession is already overcrowded, and such a plan of elimination and exclusion for them serves its purpose well by the survival of the fittest in meeting strict laws and stern ethics.

The chiropractic profession (not so called by B. J.), believes in liberty of conscience (ethics), laws that the majority can qualify under, and rapidly increasing numbers. We

say they are not wise, but we must admit such a policy is serving their purpose well for they are increasing like an insect pest and their larvae are found in almost every community.

What about the osteopathic profession? Community after community, city after city, in every State is calling and begging for more D.O.'s., yet they cannot be supplied. Why? The schools can't get the necessary number of students and as a consequence cannot furnish the required number of graduate D.O.'s. Some schools are already growing weak and are sending out SOS signals. Why is this existing fact? Why aren't we growing numerically as we progress scientifically? Is osteopathy as a science at fault? Has it failed us in time of need? No! No! No! It is always growing better and its practitioners more efficient.

Brethren, we lack system and co-operation. I will no doubt elicit much criticism by saying

## The Osteopathic Post Graduate Efficiency Course

Given by

The DENVER POLYCLINIC  
and  
POST GRADUATE COLLEGE

This course, which has become so well known to the profession, will be given again beginning Monday, August 1st, and will last four weeks.

One who takes a post graduate course and gets two or three good pointers which will help him to do his work better, easier and quicker will find it is well worth the time and money spent to get it. In the Efficiency Course you get about fifty hours of actual efficiency work covering problems on every phase of the business side of practice and *personal efficiency*.

### REVIEW

A review over many of the most important subjects will be given with the aid of some of the best men and women in the osteopathic profession. Subjects such as, *Osteopathic Technique; Eye, Ear, Nose and Throat* for the general practitioner; *General Diagnosis; Refraction; Dietetics; Gynecology; Orificial Surgery; Medical Gymnastics*, etc., will be given.

Many who have taken this course have greatly increased their practice within the first year, and have more than made up for the time spent by getting their work done with greater satisfaction as well as increased income.

Last summer the number desiring to take the course was more than could be accommodated. Those interested should register early in order to be sure of a reservation. For further information, address

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*Trustee*

Dr. J. E. Ramsey  
*Trustee*

we have cherished stiff ethics and stringent State laws (aspiring to equal medical standards) at the expense of what we most love—our science, *Osteopathy*. Let us look the future soberly and thoughtfully in the face. What will be the osteopathic profession twenty-five years hence at the present rate of increase(?) during the past five years? Suppose a practitioner who has been in practice ten years, or longer, wishes to remove on account of his health or otherwise to some of those States that have recently enacted new laws governing osteopathy. Can he meet their requirements for reciprocity? Probably 25% can—not many more. Our zeal to plan a beautiful banner on a high eminence has led us into enemy territory. He is now at our throat.

The field man is struck, our new recruits are struck, and because of diminishing numbers, osteopathy is being pinched back. Is this the beginning of our last sleep—or are we to awaken to new vigor? Are you an engineer or a brakeman in the profession? Our ranks need stimulation. It must come by raw recruits—the new students, and don't trip them up and humiliate them when they knock at our State portals for admission as practitioners. If these students have met the requirements of our schools which are accredited by the A.O.A., we should welcome them into the fold.

### West Virginia Rural Sections Need Doctors

[From Chicago Evening Post]

Morgantown, W. Va., June 25.—A pressing demand for physicians who will live and practice in rural communities is the most important problem confronting West Virginia, according to the authorities of the school of medicine of the University of West Virginia here.

Summerville, the county seat of Nicholas county, does not have a doctor, and Clay county has only one to look after the people living in its 332 square miles. In some of the other counties, many people live from fifteen to twenty miles from the nearest physician, and in some of the mountain counties it has been found almost impossible to get doctors to locate in the country districts. On the other hand, the cities of the state are very well supplied with medical men. Charleston, the capital, with a population of 39,608, having 102.

"It is not always true that the city or town doctor makes more money than the country doctor," says a statement by Dean Simpson of the school of medicine. "Country people do not object to paying good fees for medical attention. They are usually glad to get it at any price."

\* \* \*

This is just what The *OP* has been forecasting for eight years. It is all the result of an unholy restriction of the output of medical graduates by a too-far-forced standard of education. Now, when the thing is achieved which the AMA deliberately set out to accomplish, and when the peril is realized which The *OP* foretold eight years ago, namely, that the people of country districts would soon be deprived of a sufficient number of doctors to look after their sick and injured, the medics begin to deplore it as a public misfortune and speak of it in bated breath as though it were the result of a mysteriously working Providence!

Who is it that is simple minded—the doctors or the plain pee-pul?

The answer to this famine for doctors in rural sections is to lower the over-strained medical standards so that Class B colleges can operate again and graduate enough doctors to supply rural districts.

Osteopathy could do thus, even if the "regular" medical profession refuses to do it.

And if osteopathy won't, pyropraxy will.

## Healing

action together with

Astringent, Antiseptic, Antiphlogistic,  
Styptic, Soothing

influence is demanded in palliative  
treatments of

*Hemorrhoids, Fissure, Fistula,  
Pruritus*

## MICAJAH'S SUPPOSITORIES

contain no narcotic or toxic drug, hence they can be used ad libitum to keep the patient comfortable. Prompt to act.

Prolonged in effect

MICAJAH & COMPANY,  
Warren, Pa.

Send me samples of Suppositories and literature

\_\_\_\_\_, M. D.

(E) \_\_\_\_\_

MICAJAH & CO. Warren, Pa.

Doubters Made Believers  
by Reading

### "SOMETHING WRONG"

This clear little educational book with illustrations that emphasize the text is helping hundreds of laymen to get the viewpoint that gives them confidence in osteopathy. One Cleveland osteopath has used three hundred copies this past year.

Order them by the hundred. Give one to each patient. Use them for Christmas remembrances if you wish.

### "SOMETHING WRONG"

Price List:

Copies	Cloth Only
100.....	\$50.00
50.....	30.00
25.....	16.25
10.....	7.00
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TERMS—Check or draft to accompany the order or post-dated checks received with the order accepted on all orders amounting to more than Ten Dollars.

Ten Dollars with the order and the balance in 30-day post-dated checks for \$10.00 each or less if the balance is less than \$10.00.

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

## “GET the VISION!”

### A Busy Practitioner Talks Publicity and Practice Building

Does Dr. E. H. Cosner, Dayton, Ohio?

I don't see any reason why you should have to make so much publicity in *OP* about educating our patients and building up practice. The whole thing could be summed up in a nut-shell like this: As you know, I have been using Osteopathic Health for the past eighteen years and I have used it persistently. If you will look over your books you will find I have used as high as 4,000 copies, some years.

My practice has increased an average of \$1,000 per year for over eighteen years. And right now is keeping “yours truly” very busy keeping himself in physical shape and keeping free of a grouch or nervous conditions. Now you know we doctors have to stay in fine shape to make others feel good and it means a whole lot, to take good care of yourself.

Seems to me there ought not to be any argument about an osteopath using a couple hundred good osteopathic magazines each month. Besides that, I use books on osteopathy, loan them to my patients, nearly every one in the family reads them; then the books are brought back. I have books on osteopathy that I should like to know how many times they have been loaned. And don't forget that while I began using the Osteopathic Health in June, 1903, I am using more of them in May, 1921, and they are still very fine “copy.”

Sure, educate our patients; teach them what osteopathy is, how broad it is, what it covers, etc. Keep in mind that most all our new patients are totally ignorant of our science. A brand new, newsy booklet every two weeks, keeps them coming. Now after I read The *OP*

I am always more enthusiastic, aren't you? Well, it works the same way with patients. Keep them reading.

If I were not so busy I should like to write some articles for Osteopathic Health, but you have no one to blame but “OH” that I don't write more articles than I do.

Every osteopath should keep up with the times. I take every osteopathic magazine printed and I read them, if possible, the day they come.

I have taken post graduate work three times and always take a month's vacation each summer. I should hate to think that I couldn't make a good living eleven months in a year. These are some of the pointers that come to my mind in a hurry. I only take time to talk them to an Ediphone and the office secretary gets to them when she has time.

### Can I Ever Attain It?

The one thing that has always been uppermost in my mind, since studying osteopathy, is: Can I ever attain the knowledge, rapidity in diagnosing and adjusting the human mechanism, and the dexterity of Dr. A. T. Still? It is even doubtful whether any osteopath in existence understands, even at this advanced stage, the real mechanical side as did the “Old Doctor.” He diagnosed with psychic rapidity, and adjusted with a skill that seemed almost equally inspired. How lamentably few are really striving and longing to be like him in “finding, fixing, and leaving alone.”—*F. P. Milard, D.O., Toronto, Canada.*

### A Prize for the Answer

Why do we hear, at the conventions, a lot of talk about “the shortage of osteopathic books,” and yet when one is written that is “100% osteopathy” it takes a year to sell 10% of the

profession?—*H. V. Halladay, D.O., Kirksville, Missouri.*

### New Cure for Colds

American in London Making Success of “Backbone Tickle”

London, Eng. (by mail).—Have you tried the backbone tickle to cure that cold?

An American medical man, Dr. D. R. J. Waters, has put up his plate in South Molton Street as a backbone magician, and is treating all manner of patients, from baronets to boxers. He is a big-chested, broad-shouldered citizen of the United States is this doctor man, who is as active as a youngster of fifteen, for all that he is sixty years of age.

He has university diplomas in every pocket. He will bring them out like a bunch of unanswered letters, and talk like a river in flood. He never stops from the moment you enter his medical parlor until he waves a graceful adieu.

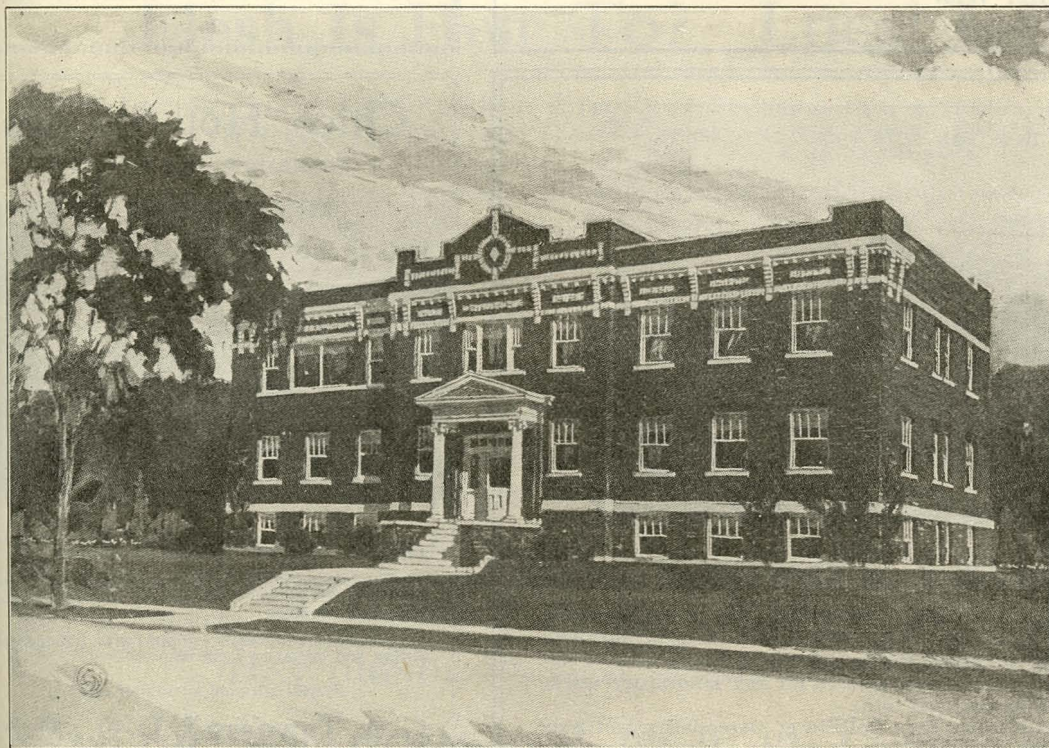
Dr. Waters works on the theory that all the essential nerves of the body come from the spine, and the ordinary ailments which make life uncomfortable are caused by pressure on the nerves. Manipulate the backbone cells and, presto, the patient is a fit man!

His flexible fingers flicker up and down a man's spine. What is the trouble? Lumbago? A bang, a press and a crack of the bone—“And now that's put right,” says the doctor. Is it a cold? A tickle, a flick and a crack, and “no more cold” from the doctor. People who have been thoroughly backboned say that his cures are remarkably effective.

A Daily Express representative, who had his backbone well and truly thumped, yesterday, came away feeling like a spring morning and with an over-the-bounding heather walk. He has not sneezed since.

“There are eight million people in London,” said the doctor, “and I am going to make them all fit. What a future!”—*Toronto Daily Express.*

## Wonderful Year for the Laughlin Hospital, Kirksville



The Laughlin Hospital, Kirksville, Mo.—Dedicated to Andrew Taylor Still

Our first year reveals a very proud record for this new institution. Over 900 surgical cases were handled, just as they came, with a mortality of but three in that number. Receipts for the year were over \$105,000 — practically all of it Dr. Geo. M. Laughlin's work.

Our institution is entirely out of debt and paid for from the receipts of our practice. It is one of the best equipped small hospitals in the state. We maintain a fine home adjoining for nurses. We are prepared to handle successfully all classes of surgical cases and invite the co-operation of osteopaths.

An able staff supports Dr. Laughlin in the following departments: 1. Osteopathic. 2. Orthopedic. 3. General Surgical. 4. Obstetrics. 5. Gynecology. 6. Nose and Throat. 7. Proctology and Urology. 8. X-Ray and Laboratory Diagnosis.

For further information address Dr. George M. Laughlin, Kirksville, Mo.

### To Attract Endowments

Why haven't more wealthy men been attracted to osteopathy as a suitable field for their gifts? Perhaps one reason is that the D.O.'s. who have come in contact with such men have not told them of the possibility of doing good by giving to osteopathic institutions. Another reason may be, the fact that some of our colleges and hospitals are conducted altogether for profit. The AOA should see to it that at least one reputable school is conducted so that it will attract gifts, and all D.O.'s. should make it a point to inform their patients of the fact and, if necessary, solicit gifts for such institutions.—*G. A. Bradfute, D.O., Caruthersville, Mo.*

### Suspect Impacted Molar

Make it part of your routine examination to notice whether the third molar or wisdom teeth are still unerupted, and if in an adult you find these teeth unerupted, insist on a dental x-ray to show whether or not the tooth is impacted and pressing against the roots of the second molar. The tremendous amount of reflex irritation thus produced can not be estimated except that the irritation produced breaks down the normal resistance of far-distant organs, causing tuberculosis and Bright's disease and a host of other constitutional diseases. Extraction of the offending tooth will show a marked result on the patient's health.—*Paul Sinclair, D.O., Lincoln, Nebr.*

### Play Up Adjustment

I hear so much about spinal adjustments coming from chiropractic sources that sometimes I wonder if they are not doing more to steal our thunder than we imagine? I have been approached by a number of prospective as well as new patients in the last few months inquiring if I do spinal adjusting! I have put on the literature I get out and also on my letter head "Osteopaths are the original spinal adjusters". It would seem to me that to have the OH carry something like that, to the effect that osteopaths *do* adjust the spine, and carry it on the front page where the reader can see it first would help to counteract this chiropractic virus.—*Wm. L. Grubb, D.O., Pittsburgh, Pa.*

## BUILDING FOOD FOR ALL AGES



### The ORIGINAL

A very useful and reliable adjunct to Osteopathic treatments, for patients requiring a prescribed diet.

Avoid imitations of the ORIGINAL product of reliable quality.

*Samples prepaid upon request.*

**HORLICK'S MALTED MILK COMPANY**  
Racine, Wis.

## FOOD FUNDAMENTALS

is a book that can be sold. That is what it is for. It is worth many times the money value placed on it. The third edition cost more than one hundred per cent above that of the second edition, but the increase in price is much less than that.

It is a book being widely distributed and largely used by its purchasers. It is very practical and useful. When purchased in dozen quantities its cost is but little more than two dollars a copy. If your order for a dozen proves to be for more than you can use, those left will be taken back.

Price, \$3.00 a copy; six for \$15.00;  
one dozen for \$25.00.

**DR. E. H. BEAN**

71 E. State Street Columbus, Ohio



### Three New Men Added to Our Staff

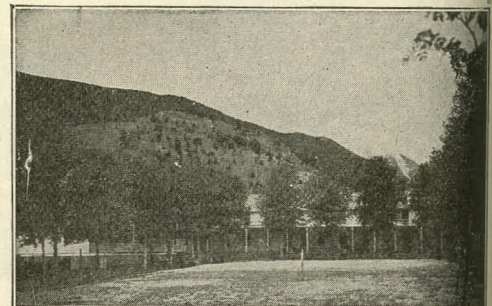
DR. E. C. BRANN, who has been doing work under Dr. Ruddy for twelve months, is prepared to do any work in the eye, ear, nose and throat—either treatment or surgical.

DR. L. M. WILLIAMS, who has served in army laboratories two years after completing the army course, also Dr. Lane's course, is prepared to do any laboratory work, including Wasserman's, blood chemistry, medico legal, etc.

DR. F. L. BARR, recent graduate of the Kansas City College of Osteopathy and Surgery, is also with us now.

**SOUTHWESTERN OSTEOPATHIC SANITARIUM, Blackwell, Oklahoma**

## Chico Hot Springs Sanitarium and Hospital



Located in the heart of the Rocky Mountains at an elevation of 5000 feet. Open the year around.

The Mineral Water baths and drinking is second to none for Rheumatism, Skin Diseases, Gastro-intestinal and kidney troubles.

Hospital is completely equipped with Laboratories X-Ray and operating facilities.

*Special attention to surgical cases.*

**G. A. Townsend, D. O., M.D.**

Surgeon-in-Chief

Emigrant, Montana, Post Office

### Advertising

The lack of harmony in our ranks is appalling and if we don't hang together we will soon all be pulled separately. Another thought, if osteopathy is such a boon to sufferers are we not criminally negligent for not educating the people up to its merits by using every known means of publicity and then some?—*Harry Fowler, D.O., Lewistown, Pa.*

### We Need More Contact

Human nature is the same, whether in a profession or trade. Work and viewpoint effect the only difference. As a society officer, it seems to me the profession's greatest need is the inspiration of closer association and more active organization work. Busy with practice, or discouraged by a lack of it, we move in ruts. Reading supplies ideas, but the aftermath prevents their fruition. Association provides that personal touch that is both an example and an inspiration. Activity in organized work provides practice in unselfish endeavor and these two make us bigger and more efficient. In short, we tend to be clannish. That is usual, but it circumscribes our growth as individuals. This may be offset by more organized mixing and a recognition of our responsibilities to our science in organized work.—*A. P. Firth, D.O., Newark, N. J.*

### A Trick in Insomnia

Try this with your next patient who lies awake, unable to sleep, nervous, rolling about, etc. Advise him not to lie in bed under nervous tension; simply get up, turn on the light, get the clock or watch near where he can see it; have him lie on his back on a rug or on the floor, arms and legs relaxed; just watch clock five minutes, then return to bed. Usually he will fall asleep and forget whatever is on his mind. I get good results with this.—*J. H. Henderson, D.O., Olean, N. Y.*

### Doctor Joslin on Drugs

Doctor Joslin, of Harvard University, in his up-to-date work on "Diabetes," says: "I find that the doctors who use the most drugs in this disease, test the urine the least. A good rule to follow in regard to drugs, is that of Emerson for novels—wait a year."—*E. C. Deming, M.D., D.O., Edmonton, Alta.*

### Diagnose the Patient, Not the Ill

The best advertisement for osteopathy is to diagnose thoroughly your patient and not the disease. Then treat your patient and his or her condition accordingly. Routine treatment is a habit not endorsed by the public.—*E. E. Bragg, D.O., Atlanta, Ga.*

## ASHEVILLE OSTEOPATHIC SANATORIUM

Asheville, North Carolina

Best Climate in America  
Best Water in America  
Best Scenery in America

Here your patients may have osteopathic care and a pleasant stay in the mountains during the hot months.

Elizabeth E. Smith, D. O.

## What Is the Chief Factor in Most Diseases that Flesh Is Heir To? Local Inflammation

Hence to treat Local Inflammation directly is to reach and remove the cause as well as to relieve symptoms: DIONOL DOES BOTH!

DIONOL acts directly to oppose and overcome local inflammation, acting in harmony with established physiological principles, and giving practical clinical results.

*For instance:*

#### THE DIONOL COMPANY:

Recently I treated a very severe case of tibial periostitis and used nothing else. The man's leg was swollen from knee to ankle, twice its normal size at ankle and was a deep purple in color. There was considerable temperature and severe prostration. It was the most alarming thing of its kind I ever saw and I thought the man would surely lose his leg. I called a surgeon in consultation but he advised a continuation of the methods I was then using for a while. The next day the leg

Spokane, Wash.

started to improve and in five days the man was back to work. He was confined to the house less than two weeks altogether. I think it was remarkable. According to all rules he should have been laid up two or three months with the chances of losing his leg. The treatment consisted of Dionol applied very liberally and renewed every four hours, night and day, elevating the foot and covering the dressing with hot water bottles. That was all.

Dr. C. ....

If case records mean anything to *you*, we can submit abundant evidence of the practical efficiency of DIONOL. If you prefer to make it a case of "the proof of the pudding," send for literature clinical reports, pamphlet and

**TEST DIONOL**—*For your patients' welfare. For your own prestige.*

**THE DIONOL COMPANY, (Dept. 12) Garfield Bldg., Detroit, Michigan**



## Use A. T. Still's Writings

I think osteopaths should quit knocking their own profession. Also quit quoting our imitators. Use Dr. A. T. Still's Research and Practice. I am called to the bedside of a niece in Ohio who has T. B. I shall take daddy's book with me and see what I can do. That book is a mine of information.—*F. J. Barrows, D.O., Lawrence, Kans.*

## The Need Is There

There is work enough to keep all of us busy all the time. Whose fault is it if we are not busy?—*G. L. Spivey, D.O., Corpus Christi, Tex.*

## Move with Your Planet!

Sitting in a train during a stop in a station and seeing another train on an adjoining track pull out going in the direction he is facing often gives one the feeling of being carried backward. Let that moving train represent Progress; then the feeling of being carried backward represents what is actually happening to you, if you are not keeping up with Progress. Osteopathy is alive. "Progress is the law of life" (Browning). If you would keep up, read the various osteopathic publications, get the osteopathic books, attend local meeting and state and national conventions. Get on the moving train.—*C. B. Rowlingson, D.O., Santa Monica, Calif.*

## Dogma

What we need in our schools is more truth and less fanaticism. Mechanical manipulation does not necessarily rank above the use of drugs, serums and ointments in the treatment of disease, and far below surgery are they all. Ninety-nine per cent of the cure is the patient's resistance. The D.O. who refuses to use antitoxin in the treatment of diphtheria does so either through ignorance or selfish motives. We are often greater fools than the M.D. who denounces osteopathy. "Back to the backbone" is fanaticism—who ever left it?—*E. Paul Harris, D.O., Gallatin, Mo.*

## The Personal Equation

Personality of the patients—their faults, likes and dislikes—to inspire faith in the restless and indifferent—to bring happiness to them by relieving them and assuring them there is a cure. This understanding and aim makes my work easier and interesting.—*C. O. Van Arsdale, D.O., Park Ridge, Ill.*

## The Two-Purpose College

Occasionally I receive a "gab-sheet" from a double-purposed school, the sole object apparently being to dis-join the osteopathic profession. Personally, I am not a believer in these double-barreled (D.O. & M.D.) institutions. Without harmony we can accomplish but little. Couple osteopathy and harmony together and success is assured.—*F. S. Boals, D.O., Stanton, Nebraska.*

## Mutual Student—College—Practitioner Fund

Much has been written and said in a general way about recruiting students for the Course in Osteopathy, but most of those I have read, lack concreteness.

For those who love the Science of Osteopathy and feel the urgent need for more practitioners, I have these suggestions, viz:

In most every community there is an honest and trustworthy young man or young woman, who would like to study osteopathy and you have reason to believe would make a successful practitioner, but they lack funds to put them thru the school.

If you are really interested in such a person and can spare the money for a good investment, offer to loan them such as they need per month or for the year, payable in Five (5) years from date, at a reasonable rate of interest. Continue the second, third and fourth years in the same manner, loaning on Five (5) year notes.

This plan will give your student a little over one year in practice to meet the first note and the other three will fall due per month, or annually thereafter, as written, which will give the practitioner ample time to meet them easily.

If you like the plan and want your money to work for osteopaths and osteopathy, have another student ready to take up notes when due, by re-writing each and pursue his course with proceeds, less the interest, thus keeping the good work in progress, enrolling, educating, graduating, student after student each four years and yet you receive double interest on the investment,—interest in osteopathy and interest in money, as paid by each student in practice.

By insuring the life of each student enrolled in your favor, possible loss by death is eliminated. Premiums thus paid shall be included as part of loan and fully repaid.

Here you have a mutual student, college, practitioner fund, worthy of careful consideration.—*Chas. A. Champlin, D.O., Hope, Ark.*

You must like a thing with an intense ardor before you can sell it.—*J. Ogden Armour.*

# 258% GAIN

## KANSAS CITY COLLEGE of OSTEOPATHY and SURGERY

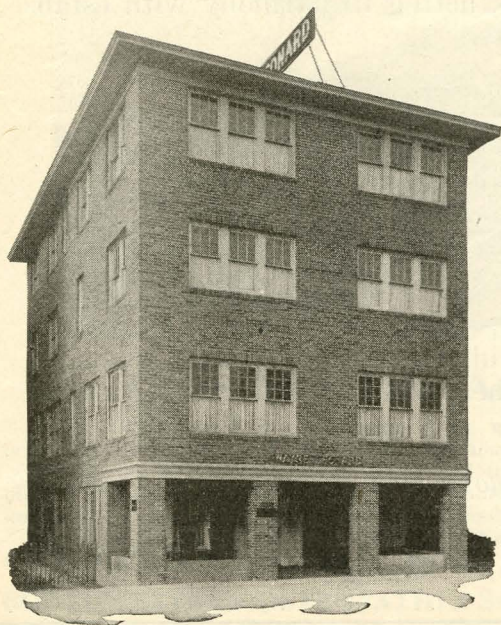
had the above student gain for 1920-1921.  
Nearly tripled its enrollment and now starting  
for a more remarkable record for 1921-1922.

*It's "The Aggressive College"*

2105 Independence Avenue  
Kansas City, Missouri

## Wayne-Leonard Osteopathic Sanitarium

130 So. Maryland Ave., Atlantic City, N. J.



Dear Doctor: We invite your attention to the fact that we are giving special attention to milk diet cases.

We employ the Porter Milk Diet Method exclusively.

All milk used in milk diet cases is supplied by the Walker-Gordon Company. It is a certified raw Holstein milk. There is none better.

For particulars regarding milk diet and other cases, address—

**Dr. L. H. English**

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ATLANTIC CITY

N. J.

**To Our Patients:**

**Osteopathy, Too. Has Its Specialists:  
"We Can Take Care of You Within  
Our Own Profession"**

That is the message of the July issue of "Osteopathic Health" and it will increase public confidence in your profession and in your own private practice to give this message wide distribution. Now on sale and ready for delivery. It is entitled "The Osteopathic Specialist in Diseases of the Ear, Nose, Throat and Eye." Can't you find good use for a thousand of them?"

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for OSTEOPATHS

Waukegan, Illinois

**The Perfect Sight Restorer**

Dr. Cole's



For treatment of the eye. The eye cup fits over the closed eyelid, and by suction manipulates all structures of the eye, moulds the eyeball into its normal shape, establishes circulation of blood, and normal functioning of the nerves. Restores vision in far sight, near sight, Astigmatism, causes absorption of Cataracts, relieves attacks of vertigo, sick headache, nervousness and other conditions which are due to eye strain. The P. S. R. is made of polished hard rubber, cannot wear out nor liable to get out of order. Guaranteed to give satisfaction if used according to instructions

Write for descriptive literature.

PRICE \$5.00

**PERFECT SIGHT CO.**

Dubuque, Iowa

**POST-REMOVAL  
CLEAN-UP SALE**

**Big Value Package for \$5.50**

We have been straightening out our stock brochures since we arrived at our Waukegan plant. We find we have some odds and ends which we desire to dispense of quickly. We have laid aside a number of packages, each package numbering 150 brochures and containing at least some of each of the following:

"An Osteopath's Explanation to a Health Seeker," "Questions Often Asked About Osteopathy and Their Answers," "How a Case of Sleeping Sickness Found a Cure," "Osteopathy in the Inflammatory Diseases," "A General Sketch of Osteopathy," "Osteopathy Potent Where Serums and Vaccines Fail," "Osteopathy in Winter's Ills," "A. T. Still as a Medical Thinker," "Most Diseases are of Spinal Origin," "Osteopathy as a Science," and "Osteopathy Cures Various Nervous and Blood Disorders."

While they last, or for a period limited to not longer than 30 days, we will sell these assortments at \$5.50 per package, "as is." You can have one, two or three packages, but the rate per package is the same. If it is requested, we will imprint professional card without charge.

If you want to do some campaigning to a new list of names, here is your chance to get the literature for it at a low cost. You can send us your list if you wish and we will do the addressing and mailing for you. The extra charge is 50 cents per hundred for addressing and \$1.00 per hundred for postage. There are about 50 of these packages. They will "move away" quickly, you may be sure. If you want one or two of them let us have your name and remittance promptly.

**The Bunting Publications, Inc.**  
Waukegan, Illinois

**Do You Figure Depreciation?**

How much do you charge off to personal depreciation per year? Subtract your present age from 55 or 60, multiply the above sum by that number and invest the total at say, 6%. The answer will be your income when you retire. The answer will also be an indication of the actual success you are making. Of course you may not retire at 55 or 60, but if you are successful now, you ought to be able to.—*J. A. Van Brakle, D.O., Portland, Oregon.*

**Use Your Diagnostic Instruments**

Examine every case the first time thoroughly. Make this examination so thorough that it will, if nothing more, impress the patient that you know your business. Don't stop with osseous examination alone; use your stethoscope, ophthalmoscope, sphygmomanometer and all your other diagnostic instruments. Diagnosis is 95%, common sense is 4%, treatment is 1%. This will gain the patient's confidence, and without this you won't succeed.—*F. E. Wilcox, D.O., Hanover, Pa.*

**More Students**

Some think osteopathy is not keeping abreast of chiropractic because they have stolen our thunder. Not so! Osteopaths are making adjustment as much as ever. We are falling back in relative numbers because we have increased the course to four years. Four long years is a deterring factor. We could get twice as many students on a three-year course, and that is enough for most needs. Many of our best men took but two years. Give an extra year for a specialist or a surgeon. This would increase our numbers and provide enough osteopaths also.—*E. A. Cole, D.O., Bowling Green, Ohio.*

**Public Education**

The one great need is educating the public directly, osteopathically. The literature issued too often knocks the medical profession or the chiropractors, both of whom have their friends. The Omaha Bee with a full page tells how chiropractic treatments cures different diseases but does not use space to tell what the medic or the osteopath does not do. Page 152 of Osteopathic Magazine is a good schooling for the laity, to be used in country papers.—*O. S. Trigg, D.O., Broken Bow, Nebr.*

**The Objective**

In spite of jangling voices, let's go straight ahead.

Jangling voices—all the things which distract, pull and haul, discourage and confuse—no matter who, what, where, when, why.

LET'S—will and freedom to  
GO—Positive, steady, aggressive motion  
STRAIGHT—Doing our own kind of work and not the other fellow's.

AHEAD—Check old diagnosis, correct new ones, carefully applied therapeutics.

Study, study, study.—*Elwood J. Thorne, D.O., Pasadena, Calif.*

**Got Your Student Yet?**

"Remember our Colleges". The future of osteopathy depends upon a steadily increasing flow of osteopathic physicians from our colleges into the field to care for the increased demand for osteopathy. Send at least one student for the coming fall class to your nearest college.—*Earl W. Smith, D.O., Kansas City College of Osteopathy.*

**It Only Helps**

"It takes more than a McManis table to make a good osteopath."—*F. B. McTigue, D.O., Emmetsburg, Iowa.*

**Special Information  
for Osteopaths**

Under the laws of some States osteopaths are prohibited from using anything of a drug nature.

Dionol and Emulsified Dionol **have no drug contents** whatever and hence do not come under these restrictions. Their action is in strict consonance with osteopathic principles, being entirely mechanical, hence no drug re-actions are possible.

Osteopaths, throughout America, are using large quantities of these preparations, and there has never been a legal exception taken to their use, excepting in one case, and when the authorities learned the above facts the case went by default and they never even appeared against the doctor in question.

Dionol treatment is the only remedial agent that we are aware of that acts strictly in a mechanical sense and without drug reaction and which may be safely employed, internally or externally by drugless physicians generally.—**The Dionol Co., Garfield Bldg., Detroit, Mich.**



**The Delaware Springs Sanitarium**

Emphasizes *Diagnosis*, believing that a condition accurately diagnosed is half cured.

All modern facilities for diagnosis, as well as treatment, are found in our equipment.

Our institution has been inspected and endorsed by many of the best men in our profession.

**THE DELAWARE SPRINGS SANITARIUM**  
Delaware, Ohio

**Don't Complain of Unfair Competition**

Unless you are doing your part to smoke the imitators out. You can use "Chiropractic Kleptomaniac" in hundred lots at 1½ cents apiece. It pays.

### For High Blood Pressure

In high blood pressure compress first and second ribs, then release suddenly. Pay particular attention to the attachment of the rib to the transverse process in above adjustment and note the marvelous results.—*Wesley C. Warner, D.O., Fort Wayne, Ind.*

### When McManis He'ps

Mercury at 98 degrees here. Ain't it hot, when you treat 400 pounders! My intellect is equal to nothing more interesting for the profession today.—*Lola Hays, D.O., Princeton, Ill.*

### The Folks Need Education

In my town the folks need educatin'. What's the best way? Do a day's work every day and get results? I'm one of the whole, so are you. The nation needs educatin'. What's the best way? Can't the same rule apply? Who's the weak link in your chain? Would you like to be the one? A man came in my office the other day and said, "I have been in the offices and have talked to over 800 osteopaths and the trouble with the whole bunch is petty jealousy, lack of organization and the result is—just what you have today in your legislation." This D.O. says if we have more technique, or more laboratory work, or more results and better diagnosis—if we have all that, still, what will we profit if we lack organization? For the sake of osteopathy, why can't all of us work together and never mind about something that in the long run benefits only the one individual. The nation needs educatin' and the folks in my town need it too! — *W. Frank Powers, D.O., Elgin, Ill.*

### A Joke and a Warning

My best thot is that it pays not only to "stop, look and listen" but to palpate as well. Here's why. Mrs. L., second confinement, labor normal except a "dry birth" from 7 a. m. to 10:30 a. m. When the head reached the perineum she became hysterical. Chloroform and "low forceps" easily produced a nine-pound girl with small first degree lacerations, which we promptly repaired, congratulating ourselves on doing a neat job. Crede's method failed to expel placenta and we tumbled to the fact that there was another baby demanding exit. We removed the stitches, tried high forceps, then did a podalic version and produced an eight-pound girl. True twins with two placentas, amniotic sacks, etc., but a good joke on the doctor.—*E. A. Archer, D.O., Pullman, Wash.*

### Harmony Begins at Home

A suggestion for promotion of harmony in our ranks: Instead of preaching it and pleading for it from our platforms and through our press with the idea of influencing some osteopaths over in the next county or next state, let each booster and worker for the AOA make it a local affair and make an honest effort to promote some proper harmony and co-operation with his own nearest osteopaths. Many an osteopath preaches harmony at our meeting and then goes home and takes up the same old scrap with his own nearest neighbor. Cooperate and fight with (not against) your osteopathic neighbor and we will have a bigger and stronger AOA.—*A. M. Farnsworth, D.O., Keokuk, Iowa.*

### He Raised and Is Glad

I am one of those who thought he couldn't raise the price of office treatments without losing business, until The *OP* gave me the vision. I took the chance, raised and haven't had a kick. Some said they didn't see how I could have given them for \$2. Now I am having some few intimate friends kick me occasionally for not having raised sooner. Just think what I have been losing for several years! Conclusion: If we haven't the nerve to raise we are probably not worth the difference.—*J. M. Wolfe, D.O., Big Timber, Mont.*

### Tryst at the Altars of the Ideal

Be honest; be fair and square in your osteopathic treatment and teaching. Remember the Old Doctor's saying, "Find it, fix it and leave it alone; don't be engine wipers." Be a true disciple of "Our Founder." Sometimes it is hard to keep to the truth, to the straight and narrow way osteopathically, but when life is over, or before, sometimes we discover that ideals, true living count for more than material things.—*Eva B. Howze, D.O., Savannah, Georgia.*

### Would It Change Anything?

It's a hard pill for a young graduate in osteopathy to swallow to find when he gets out in practice, after having studied for four years, that he is not eligible to government or state offices, contract work, or anything outside of office practice; and also to find that he is classed with chiropractors and various other pretenders, and in so many states is not legally entitled to practice all that he is taught. Therefore, it seems selfish on the part of the osteopathic profession to withhold opportunities that would exist, if an M.D. degree were granted, and since by adding a few hours in *Materia Medica*, it could be, the graduate would be entitled to all of the privileges he deserves; and if Osteopathy is all that it is claimed to be, there would be no fear of the contamination affecting its standing. This would eliminate the desire of many present day graduates to take P.G.'s in low grade medical schools.—*W. R. Dewar, D.O., Soap Lake, Wash.*

### Against a Second College at Kirksville

If it would do any good I could say a few things about the superlative idiocy of starting a new school of Osteopathy at Kirksville. Such a school will only be started for the express purpose of attempting, for reasons of jealousy or some other equally elevating and inspiring reason, to put the A.S.O. out of business, and the profession will almost unanimously see it in that light. It would be mighty fine if some group of broad-visioned men would organize and operate a new school in St. Louis, a city where a great abundance of clinic material could speedily be developed, but to take a student's money for a course in another school in a small country town where the supply of clinic material is necessarily very limited—in fact, not sufficient for the needs of the students of the present institution, will be taking money under false pretenses, and is bound to result in failure.—*W. S. Warner, D.O., Fort Morgan, Colorado.*

### Beware of Neck Cracking

I would like to warn students in our colleges about promiscuous cracking and rough treatments, especially on the neck, which are quite prevalent among undergraduates. A great amount of harm and permanent damage is done to the ligaments. Students think they are getting technique when they practice on each other this way. Take a tip from one of the victims of this damnable custom.—*R. S. Warner, D.O., Montclair, N. J.*

## PROFESSIONAL CARDS

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# PUBLISHER'S DEPARTMENT

[This Reader is Ready for You to Order Reprinted in Your Home Newspaper]

## Health Depends on the "Body's Four Grand Systems of Elimination"

Did you ever pause long enough to reflect on what an important part elimination plays in the making or breaking of health? That all your health depends on good elimination is a dictum of physiology as true as gospel. You simply cannot retain good health permanently if your excretory channels fail in their work of ridding the body of its self-made poisons. No matter how strong one's constitution may be, it will in time be broken down if the organs of elimination do not keep active in removing the waste broken-down substances that form in the body from tissue-combustion, or the wearing out of cell life.

This all important truth of physiology, which explains at basis so much of the disease with which the physician has to deal, is charmingly told for the average man and woman in the August number of "Osteopathic Health," a little journal of health-getting by natural methods. This publication is edited in popular

language; it is for the average lay-person to read, not for doctors. The article is entitled "The Body's Four Grand Systems of Elimination." You can get a copy of this magazine free if you ask for it.

The four trunk-line sewerage systems of the body are explained. The perfect analogy is pointed out between the sewerage system of a great city and that of the human organism. There is sewage manufactured in each case—by the city as by the human organism, and this must be carefully removed and neutralized or sickness results in either case—on the one hand sickness of but one individual; on the other, of many individuals.

These four great sewerage systems of the human body are the bowels, kidneys, lungs, and skin. Interfering with the proper eliminative work of any one of these produces its own characteristic diseases. Among the many different ills traceable directly to such causes are constipation, jaundice, gallstones, "rheumatism" so-called, Bright's disease, uremia, "fevers" of various kinds, lung and skin diseases.

A new method of curing these various kinds of ills has been discovered with the advent of osteopathy, the system which gives a mechanical adjustment to right the wrong, instead of expecting it to be done by a chemical reagent. There is new hope for those who suffer from these ills since regulating the eliminative organs has been done so effectively by the osteopathic physician through correcting the blood and nerve supply of the affected parts. If you want to know this subject reliably, ask for the August number of "Osteopathic Health." It will be sent you complimentary by either Dr. . . . . . of . . . . . or the

publishers, THE BUNTING PUBLICATIONS, INC., Waukegan, Ill. A post card will bring it.

### That Automobile Number of "OH" for September

Dr. J. A. Van Brakle will make a very novel comparison in the September number of *Osteopathic Health* between the automobile engine and the ordinary every-day human motor. Van "stalls the human engine in traffic," so to speak; "puts moth balls in the gasoline" (drugs stimulating to greater activity with no actual gain); quotes some rules of the Health Road, and talks a little about flat tires, and all that. It is a very fine contribution to our popular field literature and will prove a winner. This analogy of the automobile to the human body has been used before, but this Van Brakle brochure is so complete it will be the thing referred to from now on when any osteopath talks about using that "Automobile Number." Of course, you'll want to use Van's good stuff on or before the first of September. Get your list ready for it, and put in your order now.

### Osteopathic Catechism Repeated in October

So many demands have come to us for reprinting the "Osteopathic Catechism" that we have scheduled it to be run again (after a long absence) as the October issue of *Osteopathic Health*. This old pioneer campaigner was never beaten, and has been seldom equaled, as an educator. So you ought to know what to do with it in your field.

### "Ruddy" Took 10,000 All by Himself

I like so much that special issue on Ear, nose, Throat and Eye Diseases according to osteopathy that I wish you to send me 10,000 of them.—*T. J. Ruddy, M.D., D.O., Los Angeles, Calif.*

### It Ought To Be

The book "A. T. Still, Founder of Osteopathy," by the late Michael A. Lane, should be in every library as well as the practitioner's office library.—*O. S. Triggs, D.O., Broken Bow, Nebr.*

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## "Osteopathic Health" for August

### Health Depends on "The Body's Four Grand Systems of Elimination"

The important part played by the Bowels, Kidneys, Lungs and Skin, the body's four great sewerage systems, for making either Health or Disease is explained. Ills produced by clogged body drainage are Constipation, Jaundice, "Rheumatism" Bright's Disease, Uremia, Lung and Skin Disease. Osteopathy is the best cure for these ills.

The above is the title contents of "Osteopathic Health" for August. A copy of this interesting little magazine will be mailed free of charge on request.

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### Dr. J. Deason Endorses It

That Ear, Nose, Throat and Eye brochure is good stuff. Well, it ought to be — didn't I write most of it myself? What else would you expect of it? I'll use 500 right off. — *Dr. J. Deason, Chicago, Ill.*

### What Seaman Thinks of It

I wish to compliment you on your first issue of the "Specialist" brochure. It is exceptionally good. Put me down for 2,000 copies of "The Osteopathic Specialist in Diseases of the Ear, Nose, Throat and Eye."—*K. L. Seaman, D.O., Ft. Wayne, Iowa.*

### Every Osteopath Should Read It

I have just read the proof sheets which you sent me of the special Eye, Ear, Nose and Throat issue of "Osteopathic Health" which you will produce in July. I think it is a wonderful brochure. I feel that every osteopath should receive a copy of this issue of "Osteopathic Health" and should read it carefully. There are some points in it that would do osteopathic practitioners good to ponder. Very important is that part in which the recommendation is made that certain cases should be referred to osteopathic specialists. It will help osteopathic practice generally to spread this message broadcast.—*Dr. H. J. Marshall, Secretary of the Osteopathic Oto. Larynx Ass'n., Des Moines, Iowa.*

### Lure Them Into Thinking Osteopathy—Ward

Help your patients to think osteopathically. The waiting room should be an osteopathic educational center. Our magazines are rich in usable material. News from the osteopathic world, quotations from the "Old Doctor," incidents from his life, mounted and hung on a screen attract attention and furnish food for thought. This quotation from the "Old Doctor," neatly printed, never fails to excite thought and comment: "Now, Lord, we beseech Thee, once in a great while to pummel our heads with the hailstones of reason."—*Anna G. Tinkham, D.O., Waltham, Mass.*

### Three Osteopaths In a Car

June 27th Dr. Raymond S. Ward, of Montclair, N. J., will leave for Los Angeles in his car, accompanied by Dr. Lamar K. Tuttle and his wife, Dr. Frances Axman-Tuttle of New York. They will visit Custer Battlefield, Yellowstone Park, Glacier Park, Spokane, Lake Chelan, Seattle, Mt. Rainier, Portland, Crater Lake, Mt. Shasta, Sacramento, Lake Tahoe, Yosemite Valley, Santa Barbara, and Los Angeles. A complete camping outfit will be taken and the trip will take about six weeks.

Dr. Tuttle and wife are planning to continue their research in the field of cardio-vascular disease which was begun at the A.S.O. last summer, where Dr. Tuttle with the co-operation of Dr. Geo. Still and Dr. Rieger accomplished much of value in the study of the effects of osteopathic spinal stimulation and spinal percussion on cardiac dilatation, checking the results by the McKensie electrocardiograph. The Drs. Tuttle will have the co-operation of the Los Angeles Clinical Group in their work. Dr. Ward will continue his work in surgery with Dr. Edwards Jones and will also take a year's P.G. course at the Los Angeles College of Osteopathic Physicians and Surgeons. Drs. Ward and Tuttle have been asked to write an account of their trip by one of the outdoor magazines as well as *The OP*.—*Fraternally, R. S. Ward.*

### Don't Hurt 'Em

My one best thought is: "Find it and fix it, but do not be too harsh, as twenty years practice has taught me folks do not want to be hurt."—*J. W. Riley, D.O., Norwich, N. Y.*

## Books! Books! for Osteopaths

Keep your library up to date! Look over this list and place your order for what you haven't got.

- Applied Anatomy of the Spine—*Halladay* .....\$3.50  
Osteopathic Descriptive Anatomy  
*Laughlin* .....\$6.50  
Practice of Osteopathy—  
*McConnell & Teall (1920)* \$7.50  
Physical Diagnosis and Diseases  
of the Chest—*Norris & Landis*  
(1920) .....\$9.50  
Diseases of the Head and Neck—  
*Deason (1921)* .....\$2.50  
Manual of Technique and Osteo-  
pathic Anatomy—*Goetz*...\$2.00  
Analytic Cyclopaedia of Practical  
Medicine—*Sajous (8 Vol.)* \$64  
Quiz on Osteopathic Practice—  
*Laughlin* .....\$1.50  
Quiz on Obstetrics and Gynecology  
—*Clark* .....\$2.00  
500 Osteopathic Pathology Ques-  
tions—*Hoffman* .....\$1.50  
History of Osteopathy—  
*Booth* .....\$5.00  
Autobiography of A. T. Still \$2.50  
A. T. Still, Founder of Osteopathy  
—*Lane* .....\$3.00  
Therapeutics of Activity—  
*Gour* .....\$4.00  
Osteopathy, the Science of Heal-  
ing by Adjustment—  
*Woodall* .....\$0.75  
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25TH ANNUAL

**A. O. A. CONVENTION**  
 AT HOTEL STATLER,  
 CLEVELAND, OHIO  
 JULY 25TH TO 29TH

**That Pre-Convention Session  
 a Fate-Maker**

There will be a joint meeting of the Associated Colleges of Osteopathy's Executives with the Department of Education of the AOA on Sunday morning, July 24, at 10 o'clock. Matters of the gravest importance will be considered before the general convention opens. Here is a session where interested thinkers for the profession should sit in on the hearing.

**Oto-Laryng Date**

The convention of the American Society of Ophthalmology and Oto-Laryngology will be held at Cleveland, Ohio, Thursday, July 21, 1921, and the Friday and Saturday following, which is in the week preceding the AOA convention.

**Osteopathic Woman's Associations**

The convention of the Osteopathic Women's National Association begins July 23 at 2 p. m.

**Hospital Association**

The American Osteopathic Hospital Association begins its sessions Sunday, June 24, with a noon luncheon.

**Illinois New Medical Act Held  
 Unconstitutional**

[From the Chicago Tribune]

Springfield, Ill., June 22.—[Special.]—The Illinois medical practice act as revised in 1917 was found unconstitutional in the State Supreme court today. The decision was handed down in the case of Lucius J. Love, a chiropractic of Danville, who refused to take out a license.

The court's opinion holds that the revisions of requirements for chiropractics are unreasonable and discriminatory. The court's action restores the old medical practice act in effect prior to the revision.

It was announced tonight that a motion for a new trial will be filed. In the meantime numerous prosecutions instituted by the state department of registration and education will be held up until this motion is disposed of.

**Verdict Is Unanimous**

There is little hope that the revision will be saved, however, as the opinion of the court, which was prepared by Justice Duncan, was concurred in by the full membership of the bench.

The decision is a blow to the state medical society, which spent much time in preparing the revision of 1917, but it brings joy to the heart of President Palmer of the Des Moines (Ia.) Chiropractic school, who has been protesting against the act ever since its passage. Love, who made the fight in the Supreme court, is a graduate of the Palmer school.

The revision of 1917 was prepared by Chas. E. Woodward, now president of the state constitutional convention. Its one weak spot, it seems, was the section which revised the law relating to osteopathy, chiropractics and practitioners other than medical doctors.

**Qualifications Unstated**

The old law provided for an examination and the licensing of these practitioners, but did not undertake to specify the qualifications required of applicants for licenses.

In making the revision, applicants for licenses were required to pursue a course of

study equivalent to that of the medical practitioners and in addition qualify in their own school. The educational qualification contemplated a period of four years in college.

Love took a two years' course at the Palmer school and then asked to be examined for a license. This was denied, and on advice of his attorney he began to practice for the purpose of testing the constitutionality of the law.

If the thing is right; if the vision is real; if the service is genuine, then the thing can be sold.—*J. Ogden Armour.*

**Public Health Activities**

My "one thought" for this month as well as for every month is to urge upon our profession the importance of taking an interest in matters pertaining to the public health of the community. There are so many phases of this subject that every one should be able to find an outlet for his or her particular inclination and activities. Personally, I believe the children's conferences, held in connection with the various osteopathic meetings, form one of the best medicines for public health work.—*Dr. Jenette Hubbard Bolles, Denver, Colo.*

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Our new line of introductory and supplementary printed leaflets is designed to enable osteopaths to do wider and more systematic campaigning at unprecedentedly low rates per thousand (or per hundred) of names covered. These informal messages make easy and economical the undertaking of broadcast distributions and engineering systematic rapid-fire follow-ups where the cost of using a magazine would be felt as a deterrent factor. You can economically and speedily cover entire lists of any size by this medium and command instant attention. The harvest will be proportional to the sowing. Let us tell you how to plan and conduct such campaigns. Here is the splendid assortment of subjects offered you:

**4-Page Harvest Leaflets**

- No. 1. What Doctor Shall I Employ?
- 2. Disease Caused by Mechanical Pressure.
- 3. How Osteopathic Patients are Treated.
- 4. Getting Well All Over at the Same Time.
- 5. Building Up Weak Throats.
- 6. A Chiropractor at Work.  
 (George Creel in Harper's Weekly).

Price \$10.00 per thousand,  
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**6-Page Harvest Leaflets**

- No. 7. What is Osteopathy?
- 8. A Word to Former Patients.
- 9. What Osteopathic Fingers Will Do.
- 10. Neuritis From a Slipped Rib.
- 11. What is Chiropractic?  
 (As told in Gubernatorial Veto, Supreme Court Decision and A.M.A. Journal Editorial).
- 12. Where Chiropractors Are Made.  
 (A reprint from the A.M.A. Journal).
- 13. Chiropractic Kleptomania.
- 24. Neuralgia and Headaches.

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**8-Page Harvest Leaflets**

- No. 14. An Explanation of Osteopathy.  
 (As stated by the London Times).
- 15. Why the Spine is the Basis of Health.
- 16. What Osteopathy Does for Women.
- 17. Osteopathic Aid in Pregnancy and Confinement.
- 25. Osteopathy in Obstetrics

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**1-Page Harvest Leaflets**

- No. 18. Habit in Suffering.
- 19. The Osteopath's Point of View.
- 20. An Osteopath.
- 21. The Nine Modern Wonders.
- 22. Osteopathy is Not a Remedy.
- 23. Dr. Atzen's Definition of Osteopathy.
- 26. Pain.
- 27. Insomnia.

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Imprinting your professional card is FREE on all orders bought in thousand lots. On any number (or assortment) from 100 to 900 it costs \$1.00 extra. These folders are sized to go in an ordinary letter envelope.

These osteopathic "Harvest Leaflets" do not take the place of campaigning by Osteopathic Health, but supplement it. They are scaled for easy, economical, wide distribution in units of thousands instead of hundreds, and are adequate to supply your want of something effective that will stir up quickly numerous inquiries about osteopathy. You should use them as "attention-getters". As each new inquirer is heard from you should automatically put him on your mailing list to receive Osteopathic Health, the magazine, monthly for a year's period. That is campaigning as scientific propagandists of any worthy cause would do it. We have only begun to fight for Osteopathy!

**The BUNTING PUBLICATIONS, Inc. - Waukegan, Ill.**

## Florida Passes Osteopathic Amendment

[From the Florida Osteopath]

Osteopathy's legislative amendment passed at Tallahassee and was signed by Governor Hardee May 4th. Dr. Ida Ellis Bush certainly did fine work on this bill and turned up a host of friends just at the right time. Dr. J. S. Baughmann of Pensacola made two trips to Tallahassee between Dr. Bush's trips, and did valiant service in hustling things through. Without these two our efforts would have been in vain.

The amendment was first introduced in the House May 5th, known as House Bill 594. It was referred to the Public Health Committee, composed largely of M.D.'s. who added an amendment, at our suggestion, requiring a four-year high school course in addition to a four-year professional course from those graduating since July, 1920. The committee unanimously reported the bill favorably and it passed the House May 23rd.

This amendment gives us full reciprocity privileges with those States that will grant our people the same privileges. It also cuts out the seven-year "previous practice" clause. This is an important gain for us. This amendment will make it easier for us to get a complete new law through next time.

## Proposed New Volstead Bill Fata to Chemical Industries

The American Chemical Society, a national organization of chemists, is sending out warnings that if the proposed new Volstead Bill is passed by Congress as it now reads it will prove fatal to many of our chemical and allied industries. This is a very important matter and the protest of the American Chemical Society is worthy of most serious consideration. It should not be confused at all as an attack on prohibition. It is nothing of the sort. It points out that the proposed new Volstead law would put prohibitive restrictions on industries dependent upon the use of alcohol. Such businesses for instance as commercial drug manufacturing, paint works, varnish manufacturing, photographic chemical production, dye works and many other industries and manufacturing processes. The modifications of the proposed law asked for by the American Chemical Society do not involve in any way the opposition to the saloon nor the opposition to the use of spirituous liquors as beverages, nor is it a matter of opposition to law enforcement. The chemists and legitimate manufacturers of the country are giving their aid to the enforcement of the existing law. It is simply a matter of protecting necessary and legitimate industries. It is to be hoped that blind fanaticism, through ignorance and prejudice, will not be permitted to destroy important industries. Osteopaths everywhere should use their influence against the proposed new Volstead law as it now reads.

## The Amended Fess-Capper Bill Satisfactory

We are in receipt of a copy of the new Fess-Capper bill, amended in accordance with recommendations made by the Bureau of Legislation of the AOA. The bill, as amended, has the endorsement of the Legal Department of the National Bureau of the AOA, and should be satisfactory to our profession, as a whole.

On page 8, this section appears that eliminates any possibility of unfair discrimination and which gives recognition to our profession, by direct statement of fact:

*Provided further*, That this Act shall not be construed to require any minor to receive physical examination or medical treatment whose parent or guardian objects thereto: *And provided further*, That no persons employed under

the provisions of this Act whose salary is paid in whole or in part from the moneys hereby appropriated shall use his or her position to promote the business or for the financial gain of any particular physician, surgeon, osteopath, dentist, oculist, optometrist, or other specialist, or in discrimination for or against any particular school of practitioners, registered or licensed in the respective States: *And provided further*, That nothing in this Act shall be construed as limiting the power of a parent or guardian to determine what treatment or correction shall be provided for a child and the agency or agencies to be employed.

## Correction: Blood Infusion, Not Transfusion

I appreciated the little squib you printed about blood infusion, with accent on the infusion. I am sorry, however, that my typist, in typing the copy which went to you, used the word *transfusion* in two places in the article where the word *infusion* should have been used. This is in the second paragraph referring to the kidneys resuming activity following blood "transfusions," which should read "infusions," and in the sentence just before, ending with "demonstrates the efficiency of blood transfusions," this should be "blood infusion." The difference is that the blood in this case is not given by the intravenous method but intramuscularly, as I explained in the beginning of the article. The title you have given the short article is misleading also. A correcting statement might be worth while, as I should hate to mislead any one into giving small quantities of blood intravenously without proper laboratory work to safeguard the recipient from trouble.—*Walter V. Goodfellow, D.O., Los Angeles, Calif.*



## Dr. Fechtig Leaves for Europe

Dr. St. George Fechtig, of New York City, announces that he is leaving for Europe on the S. S. Paris, sailing July 27th, to remain several months.

## Vermont News

The meeting of the Vermont Board of Osteopathic Examination and Registration was held in Brattleboro, July 6th and 7th.—*L. D. Martin, D.O., Secretary.*

## Washington News

The first examination under our new administration and reciprocity law will be July 26th. The examiners are Dr. W. T. Thomas, W. E. Waldo, Seattle, and E. B. Neffeler, Everett.—*W. T. Thomas.*

## Osteopath's Expert Testimony

Dr. Eugene Pitts, Bloomington, Ill., recently appeared as expert witness for the Illinois Automobile Insurance Exchange in a personal injury case, entitled *Kehr vs. Snow & Palmer*. The doctor's fee was \$25. He got it, too.

## Ontario Osteopaths Elect Officers

The annual meeting of the Ontario Association of Osteopaths was held June 1st. Officers elected were: President, Dr. Robert Henderson, Toronto; vice-president, Dr. Hubert Pocock, Toronto; secretary, Dr. Edgar Heist, Kitchener.

## The National Osteopathic Exhibit Almost Completed

In a letter from Assistant Curator Whitebread of the Smithsonian Institution, Dr. George Still learned that the exhibit in the National Library of the Osteopathic Profession which he started to collect three years ago was almost complete.

## Ready for Rations!

As I was informed about twenty-five years ago by the "devil" in the Kirksville Journal printing office, that editors did not have to have any brains or ideas, I accept the appointment as an associate editor of *The O.P.* When do we eat?—*Dr. Asa Willard, Missoula, Mont.*

## Phi Sigma Gamma Meeting

The national osteopathic fraternity, Phi Sigma Gamma, will hold its annual meeting and banquet in the Gold Room, Hotel Statler, Cleveland, Ohio, on the evening of July 26th, 1921. Further announcements will be made from the floor of the convention.—*Nat. W. Boyd, Secy.*

## Dr. J. J. Dunning Appointed Member of Dallas City Board of Health

By the unanimous vote of the entire association, the Osteopathic Physicians of Dallas submitted the name of Dr. J. J. Dunning, as a member of the Dallas City Board of Health. Mayor Aldridge immediately acted upon the nomination and the appointment was given to Dr. Dunning for the next two years. Dr. Sam'l Seothorn held this position during the Wozencraft administration.

## Tell It in Gath

Dr. M. L. Hartwell of St. Joseph, Missouri, had an excellent two-column article explaining the science of osteopathy in the Northern Lyon County Kansas Journal April 27th. Dr. Hartwell formerly lived in Lyon and on returning to the old stamping ground was interviewed by the editor in a way which presented the practice of osteopathy very satisfactory and completely, to the Journal's readers.

## Last Call

The St. Louis Osteopathic Association will meet regularly on Tuesday evening, June 21st, at the Marquette Hotel. Dinner at 6:30 p. m. The nominating committee advises that the returns for election of new officers will be read at this meeting. Dr. John Crenshaw will be the principal speaker, his subject is of great importance to us all. Doctor, we hope to see you there.—*Fraternaly, O. S. Miller, Pres., C. C. Wageley, Sec'y and Treas.*

## Montana's August Meeting

Dr. George M. McCole, president of the Montana Osteopathic Association, writes: "We expect to have the best State Osteopathic Convention ever held in Montana, during the week beginning August 15th at Great Falls. We have arranged to have with us several uen of national prominence, such as Dr. George Still, Dr. Virgil Halladay and others who will furnish very interesting and instructive lectures during this post graduate week of study."

## "Osteopathy" Dr. Francis W. Wetmore's Theme Before Rotary Club

In an address before the Pawtucket Rhode Island Rotary Club, Dr. F. W. Wetmore of the same city, set forth in language plain and understandable, the origin, history, and development of osteopathy over the fifty years of its existence. The doctor's efforts were received with much attention by the members who evidenced their appreciation by generous applause and congratulatory remarks at the close.

## Nine Nurses Get Diplomas

Nine nurses graduated and were given diplomas by the Nurses Training School of the A. S. O. Hospital last Monday, May 29th. Those receiving diplomas were Laura Sullivan, LaGrange, Mo.; Thelma Walters, High Point, N. C.; Eunice Willard, High Point, N. C.; Ann Neshiem, Decorah, Iowa.; Marie McGehee, Nevada, Mo.; Una Wheeler, Bernard, Kansas; Freda Daldwin, Bernard, Kansas; Naomi Meadows, St. Genevieve, Mo.; Note Trip, Braymer, Mo.

## Late Chief Justice White Firm Believer in Osteopathy

From reminiscences of the life of the late Chief Justice White of the United States Supreme Court appearing in the newspapers it was learned that he was a firm believer in the efficacy of osteopathic treatments. A Washington friend reports how he one day said to him: "I have just come from receiving a treatment from an osteopath. I walk there three afternoons a week, etc." And again, "I sit all day long listening to arguments and then go first to the osteopath or else directly home."

## Lionism

Sand and grit in a concrete base—that's Lionism; Friendly smiles and an honest face, The spirit that helps when another's down, That knows how to scatter the darkest frown, That loves its neighbor and loves its own—that's Lionism.—*From Ft. Worth Lions Club.*

Dr. C. C. Reid, of Denver, Colo., is president of the International Association of Lions Clubs, which has grown to be a most active and aggressive organization. The membership is increasing rapidly.

## High School Pupils Told of Osteopathy

The pupils of the Creston, Iowa, high school were very much pleased a short time ago in having the opportunity of hearing Dr. Taylor, president of the Des Moines "School of Osteopathy." Dr. Taylor spoke on "Osteopathy" and gave a brief history of it. He spoke on the value of an education as essential in choosing one's life profession. He also explained in detail the "group method of diagnosis" used in osteopathy. He explained that in the profession there is no limit and persons who choose this profession have a wide and interesting field in which to work.

## Dr. A. B. King Heads St. Louis Osteopaths

Dr. A. B. King, 718 Liberty Central Trust Co. Bldg. St. Louis, Mo., was elected president of the St. Louis Osteopathic Association, Dr. O. S. Miller, retiring. Dr. Faith S. Nolkemper was chosen vice-president while Dr. E. J. Brails was elected secretary and treasurer. It was decided to offer three cash prizes amounting to \$150 for the best essay on osteopathy written by members of the graduating classes of the St. Louis high schools in June 1922. The principal speaker of the evening was Dr.

John H. Crenshaw, head of the Liberty Hospital, Pendleton and Delmar avenues. He spoke on the subject of "Surgery and Osteopathy."

#### Minnesota 23rd Annual Convention Announcement

On October 7th and 8th, 1921, the Minnesota State Osteopathic Association will hold its 23rd annual convention at St. Paul. As usual a printed program will be prepared in advance and not less than two hundred distributed. As planned, this year's program will be distinctive and a very attractive booklet, consisting of twenty pages and cover—4"x7½", actual type space 3"x6½". On account of lack of bookkeeping facilities if consistent, the association is asking subscribers to mail checks with copy and cuts direct to Dr. E. S. Powell, chairman, Convention Committee, St. Paul, Minn. Your co-operation in the past is appreciated and we shall be glad to hear from you soon.

#### Central Pennsylvania Osteopathic Society Meeting

The Central Pennsylvania Osteopathic Society held its last monthly meeting of the fiscal year at the Pennsylvania Osteopathic Sanatorium, York, Pa., on June 18th. The following officers were elected for the coming year: President, Dr. M. W. Brunner, Lebanon, Pa.; vice-president, Dr. J. M. Shellenberger, York, Pa.; secretary, Dr. M. S. House, Harrisburg; treasurer, Dr. S. L. Grossman, Williamsport. After the business meeting a banquet was served to about sixty-five osteopaths and their guests. Dr. E. M. Downing, of York, was toastmaster and called on several for short talks. Dancing followed in the sanatorium parlors.—Fraternally, M. S. House, D.O., Sec'y., Harrisburg, Pa.

#### Dr. Finley's Fast Case

The Pasadena, California, Star-News of May 5th gave half a column front page to a case of Dr. Charles Finley. T. C. Mitchell, a wealthy contractor of Kansas City, who had then reached the 23rd day of fasting under the osteopath's direction. Mr. Mitchell is 60 years of age and altho he had dropped 30 pounds in weight during that time, he said he walked 40 blocks and rode 100 miles in an automobile in one day. He said he felt like a colt. From the newspaper account we judge that the patient had been suffering from auto-intoxication, which the fast, in conjunction with the doctor's treatments seems to have cleared up nicely. The paper said the patient out of gratitude was considering building a fine sanitarium for Dr. Finley.

#### Journal of Commerce Pays Tribute to Dr. E. Clair Jones

"The election of Dr. E. Clair Jones, of Lancaster, Pa., to the presidency of the Pennsylvania Osteopathic Association at the twenty-second annual meeting of that organization, May 27th, has been widely and favorably received and commented upon." The above is from the June 11th issue of the *Journal of Commerce*, Philadelphia, which devotes almost an entire column to Dr. Jones. After giving some very interesting data, as to Dr. Jones' activity during the seventeen years he has been in actual practice in Pennsylvania, the article ends with the earnest wish that the doctor "whose genial qualities have secured for him a warm and sincere friendship in the various walks of life, be spared to many more years, of health, activity and usefulness."

#### Dr. Dayton Reports Work of Free Osteopathic Clinics for Children during Year

Dr. Frank E. Dayton of Escanaba, Michigan, Clinician, National Chairman, who is conducting free clinics for children under the auspices of the Woman's Club of Escanaba, Michigan, on May 23rd submitted a report of the work accomplished during the past year. From June 1st, 1920 to May 21st, 1921; meetings 89, attendance 679, women helpers 102, one father. "This tabulation" says Dr. Dayton, "does not account for the bedside cases which have been visited in Clinic Service. The heavy burden of outside work on the part of the Welfare Nurse has in part prevented the efficiency of the Clinic, but the loyal attendance of the mothers of the unfortunate, handicapped, bent, and otherwise needy, has made for the large efficiency herein reported." Clinics are held Tuesdays and Saturdays. Dr. Dayton is planning to open a clinic at Manistiquet for Fridays.

#### Dr. McNichol to the Bat

Dr. A. M. McNichol of Dixon, Illinois, contributed a column article to the Evening Telegram of his own city, May 18th, in which he criticized the medical profession for preventing the Illinois osteopaths using the Springfield Hospital for clinics at their state meeting. Dr. McNichol turned the persecution into occasion for informing the public about the every-day commonality of this sort of medical bigotry, and also explaining osteopathy's position before the people, thus converting bigotry into a campaign for building public acquaintance and good will. It is a very excellent plan for our practitioners to do this sort of thing. Whenever there is any outrage committed by the medical men against the profession, go into the newspapers with it, and with all due decorum, firmness and dignity, state the defense of osteopathy in a way that will turn persecution into advertising and make capital for your practice.

#### Eastern Idaho Osteopathic Society Meeting Report

The Eastern Idaho Osteopathic Society met May 30th, at Dr. Grace J. Parker's office in Pocatello, Idaho. Dr. Lillian M. Whiting, professor of obstetrics at the C.O.P. & S. of Los Angeles, Calif., was the guest of honor and appeared as the third speaker on the "Circuit Clinic"

this year. The morning was spent in taking Dr. Whiting about the town and surrounding country by Dr. Parker and Mrs. V. M. Bodmer. 12:30 luncheon at Hotel Bannock; 1:30-4 p. m. technique by Drs. Whiting, Parker, Johnson, Davidson and Bodmer. 4 p. m. lecture by Dr. Whiting on obstetrics. 7 p. m. banquet at Savoy Cafe. 8 p. m. business meeting. The following were elected: Dr. A. H. McFarland, of Blackfoot, president; Dr. Geo. A. Aupperle, of Idaho Falls, vice-president; Dr. Glen I. Noe, of Idaho Falls, secretary and treasurer. 9 p. m. lecture by Dr. Whiting on the Care of the Expectant Mother. Adjourned at 11:30 p. m.—Vern M. Bodmer, D.O.

#### Chicago College Commencement Exercises

The commencement exercises of the Chicago College of Osteopathy were held in the college assembly hall on Thursday evening, June 9. The speaker of the evening was Mr. Perry S. Patterson, whose topic of discussion was "Osteopathy and the Law." Dean Raymond addressed the class with a few remarks, and the diplomas were presented to the graduates by the president of the board of trustees, Dr. Geo. H. Carpenter. A musical program was given by Mrs. Haysel Laxton Davis, soprano; Mr. Raymond Russell, baritone; Mr. Wilger L. Jones, violin; Dr. E. S. Comstock, flute, and Miss Helene Prisman, piano. Those receiving diplomas were: Alfred Charles Boehm, Jesse Yates Burbank, Clarence Herbert Couch, Emily Edith Dovesmith, George Harry Gutridge, Gustave Edgar Hecker, Sadie Ida Banks, Bernard Cowgill De Vilbis, Leslie Jacob Housel, Thorvald Lyngholm, Horace Abbott Martwick, Amy Page, Floyd Frank Peckham, Carl Webster Pierce, John Ragatz Rich, Walford August Schwab, Ethel Lorene Truax.

#### Pity the Poor Patient

Little does the average patient, hopefully gripping the prescription with which his doctor has supplied him, know what subtle care was exercised in making up that prescription. It may be that not only was due regard had to prescribe such medicines as would be most beneficial, but also "in order to promote the good of the profession," many useless, inert ingredients so as to blind the patient. St. Louis newspapers recently printed excerpts from a letter sent out by the St. Louis Retail Druggists' Association to doctors who, according to the way of thinking of this organization, needed coaching in prescription writing. The druggists hoped that their suggestions to take means to keep patients in the dark would be received in a co-operative spirit. This letter was not intended for publication and the scheme no doubt would have been passed on the public had not a certain doctor, not kindly disposed to it (we take off our hats to him for his action) given it to the press for general publication. Pity the poor patient, indeed, when druggists and medics join hands in schemes like the above.

#### Washington News Items

The following officers were elected at the June meeting in Spokane, of the Washington division of the Osteopathic Women's National Association: President, Dr. Roberta Wimer-Ford, Seattle; first vice-president, Dr. Carrie Benefield, Spokane; second vice-president, Dr. Rosetta Shortridge, Walla Walla; secretary, Dr. Elizabeth Hull Lane, Seattle; treasurer, Dr. Hattie Slaughter, Seattle; auditor, Dr. Christine V. McNeil, Mt. Vernon. Dr. Myron S. Thompson has returned to Seattle after a year's post graduate work in the east. Dr. Nellie Evans, of Florida, is spending her vacation in Seattle. Dr. Lawrence Hart, of Seattle, is spending his summer vacation in eastern Washington. Dr. Roberta Wimer-Ford goes as a delegate from Seattle to the convention in Cleveland in July, of the National Business and Professional Women's Clubs. Dr. Leanora Grant, of Seattle, has had as her guest the past week, Miss Woodford, of New Rochelle, N. Y. Dr. Homer Edward Bailey and wife, of St. Louis, are the guests of their daughter, Mrs. Aranimita Perkins in Seattle. Dr. Lydia Merrifield is again in Seattle, after a year's post graduate work at the American School of Osteopathy.—Wimer-Ford, D.O.

#### N. J. Osteopathic Society Members Entertained at "Camp Osteopathy"

Dr. Albert J. Molyneux and Dr. Cora Belle Molyneux, of 2859 Boulevard, Jersey City, N. J., entertained over the week-end at their summer home "Camp Osteopathy," Lake Hopatcong, N. J., the members of the New Jersey Osteopathic Society. They all arrived by automobiles, many bringing tents and camping equipment, pitching them about the grounds. Fishing, bathing, boating and canoeing were indulged in, and the executive committee of the society held a meeting to discuss proposed legislation for next year. It was unanimously decided to wage an aggressive campaign to remove the unfair restrictions on the practice of osteopathy in the state and that no effort should be spared to secure the right to practice osteopathy as taught in the osteopathic colleges and in accordance with the state board examination taken. Among those present were: Dr. and Mrs. Hughes, Bloomfield; Dr. and Mrs. Firth, Newark; Dr. and Mrs. Fogg, Lakewood; Dr. and Mrs. Sigler, Trenton; Dr. and Mrs. Kraus, Jersey City; Dr. and Mrs. True, Bayonne; Dr. Munroe, Orange; Dr. Waters, Newark; Dr. Ray English, Dr. Fannie English, Newark; Dr. and Mrs. Walker, Dover; Dr. and Mrs. Warner, Newark, and members of other friends and relatives of the osteopaths.

#### Dr. Spence's Pamphlet vs. AMA Intrigue

Dr. Philip S. Spence, of Hartford, state secretary of the Connecticut Osteopathic Society, in line with his previous endeavors against AMA intrigues has published a fine twenty-page pamphlet entitled, "Washington Bills

Instituting State Medicine Must be Amended or Defeated." This pamphlet shows the objectionable points of bills that are soon to come up in Washington and exposes the attempts of the American Medical Association to institute state medicine under the guise of education at the seat of our Federal Government. It calls upon all business, social and professional organizations of every kind to adopt a resolution denouncing the efforts of the AMA to get control of the personal and public health direction of the entire country for the Allopathic Physicians. Dr. Spence undoubtedly deserves the support of the entire osteopathic profession in his combat vs. the AMA. It is the battle of each and every osteopath that he is fighting. You cannot better show your appreciation of Dr. Spence's effort to further the good of the profession than by ordering for distribution a few hundred copies of his excellent pamphlet or as many as you can afford. It sells at 10 cents per copy, 100 copies for \$7.50, 1,000 for \$60.00. Address Dr. Philip S. Spence, 902 Main St., Hartford, Conn.

#### Iowa Annual Meeting

The annual meeting of the Iowa Osteopathic Association in Des Moines opened Wednesday, May 18th, at the Des Moines General Hospital with a minor and major surgery clinic, followed in the afternoon by a baby clinic at which time thirty babies were examined and treatment prescribed. Thursday at Hotel Ft. Des Moines; Dr. J. D. Edwards of St. Louis, conducted a clinic in the treatment of eye, ear, nose and throat troubles using only his fingers in the treatment. Dr. H. R. Holmes of Chicago told what had been accomplished in the way of cancer treatment at the hospital connected with the Chicago School of Osteopathy with diet, osteopathic treatment and radium. The evening session was given over to a banquet at the hotel and a picture. "Man, a Machine," at the Royal Theatre. Judge Ben I. Salinger of Carroll was the principal speaker at the morning session Friday. Dr. C. B. Atzen of Omaha was the main speaker on the program for the closing session. Dr. Lillie E. Wagoner was re-elected on the board of trustees of the organization. The state officers were all re-elected. It was decided to have group meetings next year, St. Joseph being chosen as the place of meeting, the group consisting of Missouri, Kansas, Nebraska and Iowa.

#### Dr. Maxfield's New Office and His Kimona Plan

We moved into our new quarters, 366 Sussex avenue, on July 1st. We have a very workable office, fitted up for efficiency first. I have attended eight of the last nine A.O.A. conventions and have made it a special point to talk to D.O.'s, carrying on large practices, and came to the conclusion that the plan of having several treating rooms works more satisfactorily and certainly more quickly than one treatment room with rest rooms. I have three treatment rooms, with access to one more, with entrance doors close together; treatment rooms are on one side of large hall, reception room on other. I have a back entrance to the treatment room hall, so I can go back and forth from my private office to treatment rooms without going near reception room. Each treatment room has a basin, but no couch or dresser. My aim is to simplify treatment rooms, so I have wall hooks, wall mirrors and wall shelves for combs and brushes. My brother who graduated from the A.S.O. last January will have one room with space for two more later on. You may be interested in my solution of the kimona problem. I have had made a great many—started with more than fifty—plain white kimonas. The material used wrinkles quickly. We wash them twice a week, in our home. They are first put through a washing machine, and then ironed by mangle, which requires an hour for thirty kimonas. By this system we have a fresh kimona for each patient, and my observation shows that it pleases them very much. One patient's comment was: "It adds dignity and refinement to the office." Our office building is large enough so we can use the upstairs for a few patients if we wish, possibly the starting point of a sanitarium.—Dr. J. Harris Maxfield, Newark, N. J.

#### Chicago College of Osteopathy Alumni Banquet

The annual banquet of the Chicago College of Osteopathy Alumni Association was held at the Hotel Sherman on Saturday evening, June 18th, at which were entertained the graduates of the class of June, 1921. After a fine dinner, a short speaking program was in order. Dr. Earl R. Hoskins, acting as toastmaster, was witty and very entertaining. Dr. L. C. Hanavan, the president of the association, gave the "Address of Welcome" to the class, and in his address urged the members of the class to be loyal to the profession and its organizations, particularly urging them to become members of the national, state and local osteopathic organizations. Dr. Floyd Peckham, president of the class, responded in fitting manner and pledged the loyalty of his classmates in all things osteopathic. The speaker of the evening was Rev. Wm. R. Wedderspoon, of St. James M. E. Church. His subject was "Open Doors and Windows," and it was a most eloquent appeal to each member of the class and of the profession to "open wide the windows of the mind, and of the heart and of the soul, that the best that the world has to offer may enter and enrich our characters." "For," he said, "our lives are lived according to the Laws of Imports and Exports." "That which has not been received can not be given out." He asked that all "open wide the doors of service" that our lives may have been well lived and that we may make a lasting mark in the procession of progress. Following this fine address, Laurant, the great magician, and his troupe gave an excellent entertainment lasting



for more than an hour. It was, without doubt, the finest entertainment ever given at any of the Alumni banquets. At the business meeting of the association the following were elected officers for the year 1921-1922: President, Dr. Isabel Sherman Fomon; vice-president, Dr. Walford Al Schwab; secretary-treasurer, Dr. C. A. Crosby.

#### Ruddy's Trip a Winner

The Eastern Idaho Osteopathic Society met June 8th and 9th at Dr. A. H. McFarland's home at Blackfoot. Dr. T. J. Ruddy, of Los Angeles, was met at the train in Pocatello by Dr. Grace Parker and taken by auto to Blackfoot. The kitchen of Mrs. McFarland's home was turned into an operating room under the able hands of Mesdames McFarland and Bodmer. At 1 p. m. the clinic began and Dr. Ruddy handled the patients in his usual fine manner. A variety of cases came in for his diagnosis and examination. At 7 p. m. a fish banquet was served at the Hotel Eccles. Dr. McFarland spent Tuesday afternoon fishing to prove his ability as a fisherman and show Dr. Ruddy that there really were fish in Snake River. At 9 p. m. Dr. Ruddy gave us some splendid work on "general diagnosis," having members of the profession as subjects. Those present to hear this fine work were Dr. and Mrs. A. H. McFarland of Blackfoot, Dr. Grace Parker, Dr. and Mrs. V. M. Bodmer, of Pocatello. Owing to great stress of business the doctors of Idaho Falls were unable to spend the evening with us. Thursday, at 8:20, we started with general anesthetics for tonsils and adenoids. Having the four cases back to bed at 9:30 a. m. Dr. McFarland and Bodmer proved themselves very able anesthetists. 10:30-12 spent in examining cases. 12-1 luncheon. At 1:30 we started on our afternoon clinic and Dr. Ruddy with the assistances of two nurses operated upon case after case, as quickly as the slightly soiled instruments could be exchanged for sterilized ones. This continued until 8 p. m., when after an hour for a "wee bite" he brought the clinic to a climax by doing a tonsilectomy on Dr. Andrew McCauley, of Idaho Falls, and a submucous and removing several spurs from Dr. V. M. Bodmer, of Pocatello. In all thirty cases were taken care of practically all surgical. Members of the dental, medical and nursing as well as the osteopathic profession availed themselves of the opportunity of seeing a really great osteopathic surgeon do the ordinary oral and nasal surgery in a truly extraordinary manner. This indeed was a most enjoyable and busy time and we are eagerly looking forward to Dr. Ruddy's next visit and are hoping to even excel this one. Dr. Parker brought Dr. Ruddy back to Pocatello so he could catch the 1:15 a. m. train for Salt Lake City, Utah.—V. M. Bodmer, D.O., Pocatello, Idaho.

#### PERSONAL

Dr. N. Maude Kellet, of Auburn, Me., announces the removal of her offices from 145 Hampshire St., to 45 Gamage Ave.

Dr. Donald M. Lewis announces the removal of his offices from Suite 411-13 Hippee Bldg., to 408 Securities Bldg., Des Moines, Iowa.

Dr. J. B. Eades announces that he has removed his offices to the Mayer Bldg., E. Princeton Ave., from the Coal & Coke Bldg., Bluefield, W. Va.

Dr. Roy T. Quick, of Sioux City, Iowa, was elected commander of Laurens Shull Post, veteran of foreign wars at annual meeting of the organization held recently.

Dr. C. J. Crain and Dr. Elizabeth Crain who have been practicing together for many years at Union City, Ind., have removed to Richmond, Ind., where they will operate the "Crain Sanitarium" at 2116 Main St., and general practice with office in the Murray Theatre Bldg.

Dr. W. L. Laslett, who has for many years conducted practice at West Roxbury, Mass., has become fascinated by the climatic conditions and scenic beauties of southern California. He has removed to Santa Monica where he will again engage in the practice of his profession.

Dr. Margaret O'Neil Pocock, of Toronto, Canada, and her daughter Rosamond, have sailed from New York City for Rio de Janeiro to visit her sister, Mrs. James Stone. She was accompanied by her three nieces and expects to visit in Rio de Janeiro for the next two or three months.

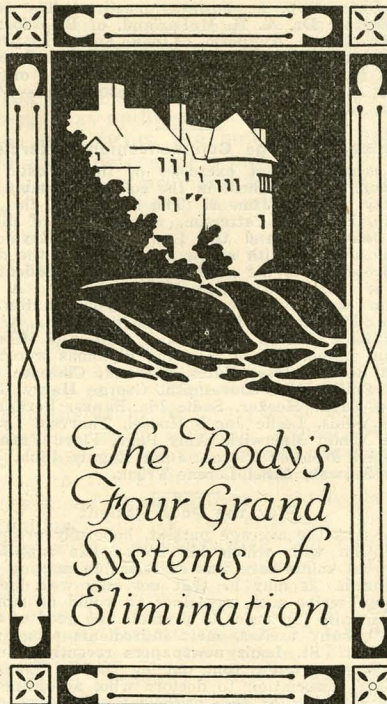
Dr. John M. MacLeod, of Massachusetts College of Osteopathy, June, 1921 class will be associated with Dr. J. M. Ogle, Empire Block, Noneton, N. S. Dr. Ogle's health has been below par recently and he is going to take a much needed rest and at the same time look after some of his other businesses.

Dr. Martha Petree, of Paris, Ky., has been elected vice-president of the community workers. Among other things she has been working with a neighborhood auxiliary garden club among the children, and they staged a play at her home recently. She is also one of the promoters of a drive to secure playground funds. About the first of August she will go to Camp Daniel Boone to give the Y. W. C. A. girls a health talk, and to examine them for their athletic work.

Doctor and Mrs. J. C. Howell and the "boys" have moved into their new home, No. 2 Lord Ave., Orlando, Fla. It is a nine room stucco building with all modern equipment, including pipeless furnace instantaneous hot water, modern laundry, etc. Externally, it is finished in white stucco with Italian blue trimmings. It is said by some to be the prettiest residence in the "city beautiful." Dr. Howell is planning to change his old residence into a private sanitarium for administration of milk diet, rest cure and other drugless methods.

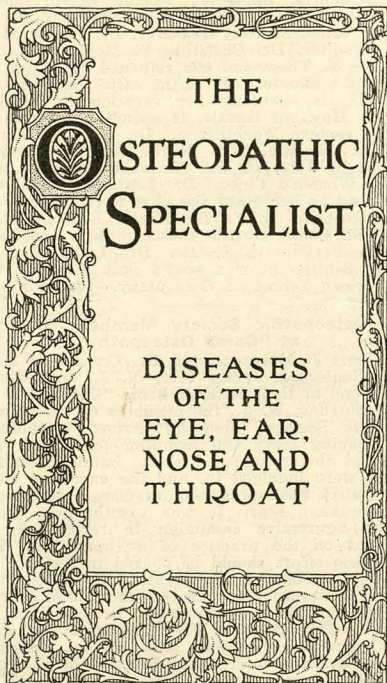
Dr. Edward Albright, of New York City, was a visitor at the plant of The Bunting Publications Waukegan,

### Osteopathic Health for August



This brochure teaches fundamental truths about health and shows how osteopathy co-operates to restore and preserve the natural economy of the body. A very efficient educator that has won thousands to understanding and appreciation of osteopathy. New edition, bound in unusually attractive cover. Speak quickly for your requirements.

### Osteopathic Health for July



This brochure gives its readers a new and enlarged conception of the position of osteopathy in the therapeutic world. It shows that the range of service obtainable through osteopathic offices is much greater than most people suppose. It creates greater confidence in osteopathic practice, and deeper respect for the osteopathic profession. Every patient should be presented with a copy. How many will you require?

July 9th. He was motoring through on his way to Milwaukee and Minneapolis where he will spend a five or six weeks' vacation with his family. Dr. Albright's new offices in New York City are in the Knickerbocker Bldg., the old Knickerbocker Hotel. He has a suite of connecting rooms on the 13th floor very conveniently arranged and with splendid light and good air. He is high enough up so that the noise of the city does not bother him at all.

#### MARRIED

Dr. John William Murphy, of Bremerton, Wash., and Marian Flora Oliver Crawford, June 29th.

Dr. Glyde Wade Bumpus and Miss Grace Mildred Graham on Wednesday, the eighth of June, 1921, at Denver, Colorado.

#### BORN

To Dr. and Mrs. J. J. Dunning, Dallas, Tex., an eight and one half pound baby boy, Richard True Dunning, on June 13th.

"I am doing my best to let everybody know that I have come to stay with Dr. and Mrs. Paul R. Kohlmeier, of 1749 L Street, Lincoln, Nebraska. I am temporarily quartered at Des Moines Osteopathic Hospital, at which place I arrived July 12, 1921. Weight 8 pounds."—Paul Rexford Kohlmeier.

#### DIED

Dr. Augusta Priscilla Musick, of Omaha, Nebr., June 22nd, age 60. Dr. Musick was better known in the profession as Mrs. John R. Musick. She was the oldest osteopathic practitioner in Omaha save one having located there in 1900. She died at the residence of her daughter, Mrs. A. W. Hunt, but burial was at Kirksville, her former home.

#### EXCHANGE and MARKET

FOR SALE—Life membership in Press Club. Address No. 301, care The OP, Waukegan, Ill.

WANTED—At once a woman assistant. One with short experience in practice preferred. Must be willing worker; first class technician; and of high grade character and qualifications generally. None other need apply. Start in June or as soon after as possible. Complete information and references should be given in first letter. Address 280, care The OP, Waukegan, Ill.

FOR SALE—Ladies' practice in hustling city of 150,000. Made \$5,000 last year. Will sell practice and office fixtures for \$2,000 cash. Wonderful opportunity for right woman. Will stay and introduce buyer. Best of reasons for selling. Answer quickly if you want this practice. Address No. 299, care The OP, Waukegan, Ill.

FOR SALE—McManis Table, like new, a bargain for cash. For appointment call Canal 908. Address No. 300, care The OP, Waukegan, Ill.

FOR SALE—Only furniture. Any one wishing a good location in one of the richest farming communities in northern Missouri where he can make some quick money, address P. M., care The OP, Waukegan, Ill., at once.

WANTED—A woman osteopathic physician of good physical build and a professional personality to take charge of a practice for several months. Acute and chronic work in a large city. Give information and experience if interested. Address No. 304, care The OP, Waukegan, Ill.

FOR SALE—As a result of death, practice, good will and office equipment in one of the best towns in Wisconsin; practice income average between \$750. to \$1,000 per month. A splendid opportunity for a man of first class educational equipment and ability as an osteopathic physician. Address No. 291, care The OP, Waukegan, Illinois.

WANTED—Well qualified osteopath as assistant to do office practice. Young man just out of college preferred. Must be willing to stay constantly on the job. Will allow 75% of practice earned less office expenses, about \$35.00 per month. Address 303, care The OP, Waukegan, Ill.

FOR SALE—At sacrifice. High grade practice (now running \$9,000 per annum and growing each month) and splendid complete equipment. Owner retiring from practice. Possession September 1st. Town of 10,000 in center of best sugar, rice and cotton country of South. Ten small towns within a radius of 20 miles. No other D.O. Equipment includes 2 McManis De Luxe Tables; 1 De Luxe Stool; Complete Eye, Ear, Nose and Throat Specialist's Outfit; Sorenson Compressed Air Cabinet; McIntosh Battery; Violet Ray Outfit; Microscope; Instruments of all kinds; Library of 130 volumes. Also upholstered ivory finish office furniture. Office occupies one entire floor especially arranged. Special practice room finished in white enamel. Living rooms in connection can be had if desired. Long lease at a reasonable rent. A wonderful opportunity for the right man to step into splendid practice and assured income. Price for practice, equipment, instruments and furniture, except pictures and rugs, \$2,720. Price with pictures and rugs, \$3,500. Part cash, balance secured notes. If you are qualified for a high grade general and specialty practice it will pay you to investigate this unusual opportunity. Address No. 292, care The OP, Waukegan, Ill.