

# **Osteopathic Truth**

**April 1920**

**Vol. 4, No. 9**

Reproduced with a gift from the Advocates for the American Osteopathic Association (AAOA Special Projects Fund)

**May not be reproduced in any format without the permission of the Museum of Osteopathic medicine,<sup>SM</sup>**

# Osteopathic Truth

A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

Pledged to the TRUTH which Father Andrew saw,  
No favor sways us, and no fear shall awe.

Volume IV

APRIL, 1920

Number 9

## Dr. A. T. Still, Master Anatomist

Alice Patterson Shibley, D. O.

I thank you for the privilege and opportunity of adding my loving testimonial and loyalty to our great founder, Dr. Andrew Taylor Still and to his wonderful contribution to science.

Thousands and thousands of hearts are raised in love and gratitude to him at this time! I regret I have not time nor space in which to tell of my early acquaintance with him, which began when I was a very little girl and has extended over these many years.

When I hear Dr. A. T. Still's name mentioned my first thought is of his joyous nature, his wit, and of how he enjoyed a joke—if on himself, so much the better.

One little incident which he greatly enjoyed occurred in the early days just after the completion of the new school building. (See picture in *Kirksville Journal*, 1895).

John, one of the janitors, had neglected to do a certain thing which Doctor had told him to do. When Dr. Still met John soon afterward he said in rather firm tones, "John, you did not obey me, why did you not do that? Who is the subordinate around here?" John, much confused and most apologetic, hastened to say, "Oh! you are, Doctor, you are!" John unwittingly turned the tide. The old Doctor laughed and said, "Oh! you are all right, John, go on to your work." Dr. Still greatly enjoyed the joke and retold it many times. In class sometimes Dr. Still would tell us how to treat a case in a certain way and would add, with that merry twinkle in his eye, "Do that, for remember I am the 'subordinate' around here."

His wit, his confidence and kindness, were some of his very strong characteristics.

Gratitude was another fine virtue. To illustrate by an incident which occurred in the very early days, soon after Dr. Still came to Kirksville, and when "the family exchequer was not up to par," as he used to say, was as follows:

The mother in a very dear family who lived near Kirksville, had received wonderful benefit from Dr. Still's treatment. When they wished to pay for this valuable service, Dr. Still said, "If, instead of paying me, you would send a box from the farm to my family for Christmas, I would be glad." Mr. and Mrs. C— gladly packed a jolly big box of substantials. When the smoke house had yielded its portion of fine hams, bacon, etc. etc., and just as the box was about to be closed, the good wife said, "See if you can chink in another —," and it was done. Dr. Still never forgot that. Years after, when our beloved Dr. Henry E. Patterson was a pupil and Secretary of the American School of Osteopathy, Dr. Still always had him send a check of twenty-five dollars, or more, to the one (then a widow) who said, "Chink in another —."

A kindness extended was never forgotten, even in after years, when Osteopathy was firmly established on a scientific foundation and he had reaped the financial rewards as well.

Dr. Still was a "master anatomist" as someone said. He also had a fine understanding along the spiritual lines. He was very intuitive. He

realized that the physical body was not the whole man. He believed in the continuity of life—that we live in a physical body, here and now, and that we ever live. This you see by his Philosophy, written some few years ago and taught in his everyday life, as all of his early pupils will testify, I am quite sure. I do not mean he believed in the man-made creeds, but in the imminence of God!

Another rare characteristic possessed by Dr. Still was that of acknowledging and apologizing when in the wrong. He was ever willing and quick to make amends. That is a mark of greatness, a virtue not often developed in the ordinary men of the day.

Dr. Still to my mind is the greatest, the grandest and the biggest man I have ever known!

I was a little girl, less than ten years of age when Dr. Still first came to Kirksville. My mother had suffered with asthma for forty-seven years. Dr. Still cured her! My love and gratitude to him began then, because he restored my mother to normal health. Many years later Dr. Still saved my life, and as soon as I was able to leave my home I entered the American School of Osteopathy. I was a member of that class of "seventeen" (of 1893) and I have tried by constant work and love for suffering humanity, to show forth my gratitude and loyalty to him, and to the splendid science of Osteopathy!

I bring, in Memoriam, a heart full of love, of happy memories and of gratitude to our beloved founder and teacher, Dr. Andrew Taylor Still!

**OSTEOPATHIC EXPERT TESTIMONY HAS RUN THE GAUNTLET AGAINST GENERAL MEDICAL EXPERT TESTIMONY ONCE MORE IN A COURT OF JUSTICE AND WON OUT**

**Jane B. W. Hall, Caribou, Maine**

The case was as follows:

A year ago action for assault and battery was brought against a man in Caribou, Maine (Aroostook County), for seizing, cuffing and kicking a young boy. At the time action was brought the boy's father did not realize that any physical damage had been done, the boy was black and blue and felt bruised, but aside from that made no complaint and in spite of that went to school and carried on his usual habits. Before the term of court when the suit was to be tried the father had reported to his attorney that the boy was sick, that he was drowsy all the time, that he slept a great deal but did not seem to rest, that he took no interest in work, that he was troubled with frequent micturition day and night, even wetting the bed at times, that he had a variable appetite, complained of his eyes hurting, and was in every way a different boy than he had been before the assault. The symptoms had begun to show up within two weeks following the above injury but at the time no connection was made between the symptoms and the assault. Mr. Hall, my husband, was attorney for the boy's father and at his direction the boy was brought to me for examination. I found a left posterior innominate; a dorsal-right lumbar-left curvature of the spine, transitional type; vertebral and rib lesions. The boy was also examined by Dr. W. B. Roben, an Osteopath in Houlton, Maine, and my findings verified. X-ray plates were taken but not being clear enough to be conclusive except to an Osteopathic eye were not used. As the boy's father wished to have an M. D. testify to the curvature—this being the first case of the kind in the state in which Osteopathic testimony would be given—a doctor was called in. With his help I stretched an adhesive tape down the boy's back and traced the spinous processes, the doctor palpating to locate the processes as traced. We also measured the boy's legs from Ant. Sup. spine to inner malleolus on each side, finding one longer than the other by one-half inch, though the measurement from greater trochanter to inner malleolus

on each side was the same—much to the puzzlement of the doctor. I also pointed out the left posterior innominate, the third rib on the right, and the upper cervical tension and tenderness, as they were glaring enough to be seen by a layman.

Two other M. D.'s who testified for the defense, also examined the boy using their methods for making the physical examination, testing for gross motion in the various spinal areas. They did not ask symptoms, nor take a thorough history of the case; and on the stand at the time of trial one admitted that his examination was not thorough enough to eliminate all possible trouble, yet he pronounced the boy "absolutely normal and all right." When asked to account for the symptoms as testified to he said he could not account for them. The other doctor said that the boy was suffering from "mental suggestion." Both M. D.'s testified that there could not be apparent variation of one-half inch in the length of the legs except following fracture or dislocation. One said that such an innominate lesion as claimed could not possibly exist since there is no motion whatever in the sacro-iliac joint; motion in that joint he said would permit the bones to spread and the body would literally go to pieces! (This doctor is a man about 35 years old, a graduate of the Harvard Medical School.) On cross-examination he admitted that the joint was held by ligaments and that ligaments were sufficiently elastic to permit of joint motion. The other doctor was made to acknowledge, under cross-examination, that variation of one-fourth to one-half inch in the apparent length of the legs (which he admitted having found in this boy's case, but claimed to be a normal condition) would cause a tilting of the pelvis with compensating spinal curvature. He found the variation in length of legs, but stoutly maintained that the pelvis was not tilted nor the spinal column curved in compensation.

Dr. Roben and I were able to convince the court that these lesions did exist. We explained how they accounted for the symptoms found. The lawyer for the defense on cross-examining me gave me the opportunity to say that motion in the sacro-iliac joint is now recognized by obstetricians and some drug doctors, that some even recognize the presence of lesions of the joint, and I cited a case that I knew of—the M. D. on that case

is a friend of the one who claims that no motion can exist in the sacro-iliac joint, so he was effectually silenced on that score! We did not claim severe or permanent damage to the boy, in fact we stated that he was well on the road to normal health. The jury rendered verdict for \$300 and costs against the defendant, much to the surprise and chagrin of the lawyers for the defense.

As Osteopathy has been very little understood in this community the very attitude of the M. D.'s for the defense which necessitated a clear explanation of our reasons for our claims, did much to advertise our knowledge of anatomy. Those listening to the trial and those hearing the comments which followed have wakened to the fact that Osteopathy is based on knowledge, and a more accurate anatomical knowledge than that displayed by these M. D.'s. Several new cases came to me immediately following this trial, and people are everywhere thinking and questioning about our science.

Once more Osteopathy has proved its worth, and by so doing has paid tribute again to Daddy Still.

**OSTEOPATHIC SOCIETY OF THE CITY OF NEW YORK**

**Holds April Meeting at Hotel Knickerbocker, Broadway and Forty-second Street, April 17, 1920.**

The following program was given: "Principles of Practice and Technique," Dr. J. Oliver Sartwell, Dean Massachusetts College of Osteopathy; "Possibilities, Opportunities and Mistakes of the National Journal, Field Literature and General Publicity," Dr. R. Kendrick Smith, Boston, Mass., Editor Journal of the A. O. A.

Business session.

**MAY A. O. A. JOURNAL A WINNER**

**Join the Association**

The A. O. A. Journal wishes to particularly call the attention of non-members to the great importance of three articles in the May number: Edwards' first announcement of the technic of his new discovery of finger surgery of the eye. Millard's first exposition of his new demonstration of the transmission of vaccination poisons through the lymphatics, and complete instruction by Young in the technic of his entirely different method of treating innominate lesions. All three are fully illustrated.

**EXOPTHALMIC GOITRE**

By F. J. Feidler, D. O., Seattle, Wash.

To the present time no argument has been advanced relative to the cause of exophthalmic goitre to change my views expressed eighteen years ago.

The medical profession is now unanimous in the belief that exophthalmic goitre is the result of hyperactivity of the thyroid gland—hyperthyroidism—producing the enlargement of the gland, the protruding eyeballs, the rapid heart, and the nervous trembling, etc.

This belief is also accepted by many osteopaths, who follow the band wagon, satisfied that the Woolly Horse is the eighth wonder of the world.

I do not believe that hyperthyroidism produces the enlargement of the gland. I believe just the reverse. I firmly believe that the enlarged gland produces the hyperthyroidism—hyperactivity, and greater production of its colloid secretion.

I further firmly believe that the enlargement is produced by vaso-motor incompetence permitting the arterioles to lose tone, distend and enlarge.

And if the vaso-motor incompetence includes the arterioles behind the eyeballs they, too, will distend, engorge and push the eyeballs forward, producing exophthalmus.

The caliber of arterioles is controlled by vaso-motor nerves in every part of the body, including the thyroid, and no one has offered even a theory that the thyroid arterioles lose tone by any other way except the regular vaso-motor incompetence way. Whether it be over-activity of the vasodilators or under-activity of the vasoconstrictors, the result is the same. The arterioles lose tone and dilate easily.

Given a general relaxation of arterioles, the thyroid would probably be effected more than other parts of the body, because the thyroid artery is so situated that it gets the full direct force of the impact of the blood as it spurts from the heart with every beat.

More likely the vaso-motor weakness is not general, but involves only the thyroid arterioles and, sometimes, also the arterioles behind the eyeballs.

The veins are only slightly enlarged by the scarcely increased pressure of the arterial blood.

The greatly increased quantity of arterial blood presented to the gland is held there a longer time, giving the gland more material to work with,

more blood from which it extracts more than normal quantity of colloid secretion which is then thrown into the general system, producing hyperthyroidism.

A normal gland cannot produce an abnormally increased quantity of colloid unless it first gets an increased quantity of material—blood—to make it from.

The dilated arterioles and increased quantity of blood must be present first. The goitre must exist first before hyperthyroidism can occur. Therefore, hyperthyroidism does not produce exophthalmic goitres.

I will not discuss at this time why the vaso-motors fail.

**DO IT NOW!**

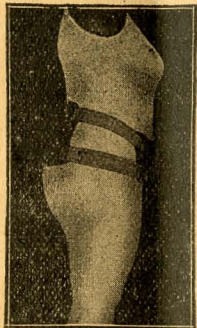
Your Hotel Reservation for the Convention

Subscribe for "Truth"

Get Two Students

Mark Your Appointment Book, "Chicago, June 28-July 5"

**Hundreds of the Foremost Osteopaths Are Using and Recommending Our EL-AR**



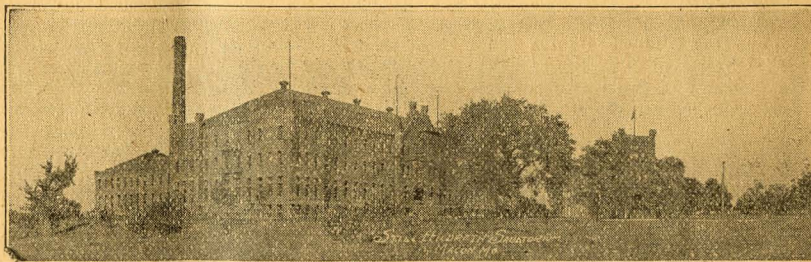
Sacro-Iliac Supporter, for the relief of Sacro-Iliac sprain, luxation and dislocation of the sacrum, for men and women.

Another important service performed by our supporter is, that it acts as an abdominal Supporter, preventing rupture and relieving all of those symptoms resulting from an unsupported heavy, pendulous abdomen.

This supporter is constructed along thoroughly scientific and practical lines and affords prompt and lasting relief for backache, pelvic aches and pains, lumbago and the long chain of aches, pains and weakness resulting from sacro-iliac strains, relaxation and dislocation.

For particulars write to the

**BATTLE CREEK DEFORMITY APPLIANCE CO.**  
714 POST BUILDING - - - BATTLE CREEK, MICH.



**Still-Hildreth Osteopathic Sanatorium**

MACON, MISSOURI

DEDICATED TO THE CURE OF NERVOUS AND MENTAL DISEASES

Address All Communications to the Above Institution.

A. G. HILDRETH, D. O.  
Superintendent

### CITY UPHOLDS OSTEOPATHS IN DISPUTE

#### Commission Adopts Motion Withholding Funds From "Flu" Hospital

Moved by Commissioner W. H. Reeves, seconded and carried by a vote of four to one of the city commission this morning:

"That the city clerk be requested to notify the Red Cross that the city commission does not feel justified in contributing city money to an institution that will not admit qualified physicians."

Chairman A. L. Hamilton alone voted against the motion after making a report to the effect that the Red Cross influenza emergency hospital is a matter the conduct of which rests with the Red Cross and that "questions relating to the individual physicians in attendance upon said patients should be referred to the Red Cross for adjustment."

In making his report Chairman Hamilton remarked that the national Red Cross and the national army does not recognize the osteopathic physician and that for this reason the osteopaths are not admitted to practice in the Red Cross emergency hospital here.

#### No Rancor in Debate

There was no rancor in the debate of the matter, which came up as the result of the communication of Dr. J. Strothard White, the osteopathic committee of one, sent to the commission last Tuesday. First Chairman Hamilton made his report upon that complaint and then Commissioner W. H. Reeves said:

"I deeply regret that a great and splendid institution like the Red Cross, which derives its support from the public at large, should throw itself open to the possible charge of unfair discrimination, or of having injured or retarded the recovery of any patients by denying them the privilege usual in a free country of selecting their own physician."

It was evident that the other commissioners did not agree with the findings of Chairman Hamilton, that the matter is one for the Red Cross to determine. Chairman Hamilton's finding read:

"With reference to the communication of Dr. J. Strothard White, of February 17, 1920, directed to the Pasadena city commission and referred by the commission to me for investigation, I would report that the hospital arrangement in the matter of attendance of physicians upon city's patients is the same as was followed last year, viz., that the city's patients are taken care of by the city physician. City patients are those who are not able to pay for hospital service. The Red Cross is accepting patients who are able to pay for the service rendered.

"These patients are not under the jurisdiction of the city and any question relating to the individual physicians in attendance upon said patients should be referred to the Red Cross for adjustment. This question cannot arise as to the city's patients, therefore I recommend that the letter from

Dr. White be referred to the Red Cross for their attention."

#### Chairman's Contention

The other commissioners expressed their belief that since the city pays the bill at the Red Cross influenza emergency hospital of such patients as are unable to pay their own expenses, the city has the right to interfere in the matter. The others so expressed themselves.

Chairman Hamilton said that since the Red Cross nationally does not recognize the osteopaths the local chapter could not be expected to deviate from the rules of the national organization. He pointed out that the Red Cross is taking a burden of expense from the shoulders of the city by conducting the emergency hospital and it was implied that the city could ill afford to conduct a hospital of its own for the patients now cared for at the Red Cross hospital who are not able to pay their own expenses.

After Commissioner Reeves' motion had prevailed another letter from Dr. White was received and read. It was filed without comment and reads as follows:

February 20, 1920.

Pasadena City Commission.

Dear Sirs: To further emphasize the importance of favorable action in the matter of osteopathic physicians practicing in the city Red Cross hospital, I want to draw to your attention the following:

During the epidemic of influenza in 1919 the reports from osteopathic physicians in the United States show that the mortality in one hundred and ten thousand cases was less than one-half of one per cent; while under medical care the loss was estimated, according to United States census bureau and leading life insurance actuaries, at five and six per cent.

In the treatment of epidemic pneumonia the osteopathic records show a very decided advantage over old school methods. The death rate under osteopaths being about ten per cent and under drug treatment thirty-three per cent.

The contention by the drug doctors that the osteopaths are not equal in educational requirements is false, for at the present time and since 1907 the graduates of our colleges have taken the same examination before the same board of examiners to practice in California as the drug doctors. Prior to 1901 the drug doctors were not required to take any state examination for license to practice, and about four thousand physicians of the old school, according to state board records, took less than twenty months' college training when there is not a single osteopath in California with less than a twenty months' course of study, and now the course of study is four years, taking the same number of hours as the medical course, and little difference in the subjects taught.

The state medical board has tried to prevent our graduates from taking the examination for the physicians and surgeons certificate, but have failed in their effort; for only yesterday Judge Wellborn in the superior court handed down a decision supporting the college of osteopathy, saying that the college

exceeded the requirements of the state medical law in the character of teaching and hours of study.

The adverse action taken by our Red Cross chapter was simply an evidence of the effort of the American Medical Association to dominate over all hospitals, and illustrates their prejudice and jealousy of osteopathic success, and not because we have been guilty of any misconduct or malpractice. Where one has suffered by an overdose of osteopathy, tens of thousands have suffered and died from drugs.

There are thousands of our taxpayers and citizens interested in the welfare of osteopathy and therefore are watching our fight for recognition; there are other thousands who are interested because they believe in the principle of the "square deal."

Thanking you for your earnest consideration of this question, I am,

Respectfully yours,

(Signed)

J. STROTHARD WHITE.

—Pasadena (Calif.) Evening Post.

February 20, 1920.

### THIRTEENTH MID-YEAR MEETING NEW YORK OSTEOPATHIC ASSN.

MARCH 6th, 1920

- 9:00—"The Physical Diagnosis of Syphilis," Thomas R. Thorburn, D. O., New York City.
- 9:45—"The Diagnosis of Disorders of the Internal Secretions," Ira W. Drew, D. O., Philadelphia, Pa.
- 10:30—"The Work of the Women's Bureau of Public Health," Aurelia S. Henry, D. O., New York City.
- 10:45—"The Position of the Philadelphia College of Osteopathy," Arthur M. Flack, D. O., Philadelphia, Pa.
- 11:15—Business Session.
- 1:30—"The Diagnosis of Cardiac Lesions with Blood Pressure Significance," George T. Cook, D. O., Buffalo, N. Y.
- 2:15—"The Osteopathic Treatment of Asthma," Mary E. McDowell, D. O., Troy, N. Y.
- 3:00—Business Session.
- 4:00—"Obesity and Its Treatment," Hugh W. Conklin, D. O., Battle Creek, Mich.
- 4:45—"The Treatment of Disorders of the Internal Secretions," Ira W. Drew, D. O., Philadelphia, Pa.
- 7:15—"Diabetes and Its Treatment," Hugh W. Conklin, D. O., Battle Creek, Mich.
- 8:00—"Professional Responsibilities," Augustus S. Downing, State Department of Education.
- 8:45—"How the Profession Can Support the Work of the Committee on Legislation," Walter S. McNabb Schenectady, N. Y.

10,000 STUDENTS  
BY FALL

# Make the Department of Education Real

Give It Power To Own and Control Our Schools

Earl J. Drinkall, D. O., Chicago

The following amendment to the By-Laws of the American Osteopathic Association will be sent to the secretary in time for its presentation before our annual convention in July. We would like to have you give it careful consideration and write us at once what changes would make it better. Perhaps you have been able to think out a better way of solving some of our school problems.

Co-operation is the true life of trade.

TO AMEND PART 8.  
DEPARTMENTS

Section 3, by substituting the following for the aforesaid Section: to-wit—

Section 3. Department of Education. The Department of Education shall consist of six members of the Board of Trustees and the Secretary

of the American Osteopathic Association. The first Department following the adoption of this Section shall consist of two members whose terms as Trustees expire in 1920, two whose terms as Trustees expire in 1921, and two whose terms as Trustees expire in 1922, and thereafter the Board of Trustees shall elect each year two members whose term as Trustees will expire three years from that date. The members of the Department of Education shall hold their office for three years while serving as Trustees, unless by resignation they wish to withdraw, at which time the Board of Trustees shall elect a successor whose term as Trustee expires at the same time as the member who withdrew.

The Department shall elect their own chairman, whose duties shall con-

stitute him the chief executive of all the schools with power to act with the secretary in executing any and all legal documents necessary to the proper conduction of the same. The chairman, with the secretary, shall appoint members of the Board of Regents when a vacancy occurs between annual meetings subject to a ratification by mail from the other members of the Department.

The secretary of the American Osteopathic Association shall be the secretary of the Department of Education and beside the usual secretarial duties he shall be in direct charge of all the schools and hospitals owned by the Department. He shall organize and conduct the central office and have direct supervision over each and every school and hospital. He shall have the power to dismiss any employee of the Department and to appoint a temporary successor until the matter is reviewed and finally disposed of by the Department. The secretary shall visit the schools when necessary, and carry out all instructions of the Department. The Secretary shall receive a salary to be fixed by the Department.

The Department shall provide for the investigation of any college applying for election as a co-operating organization, and for such investigation of the already recognized colleges as may be deemed necessary to keep this Association and the colleges in general accord in their aims and methods; and shall report thereon to the Board of Trustees of this Association, as to the election, rejection, or suspension of any such college. No college teaching the subjects of materia medica or pharmacology, nor directly or indirectly connected with any school teaching said subjects, shall be eligible to election or further recognition by this Association.

The Department shall have the power of accepting any college and allied hospital, and to conduct the same for the advancement of Osteopathy as hereinafter set forth. The Department shall have the power to purchase, build, and equip colleges and allied hospitals either in these United States or foreign countries according to the laws of the states or countries in which the same is to be located, and to conduct them for the advancement of Osteopathy as here-

## OTTARI

AN INSTITUTION FOR THE OSTEOPATHIC CARE  
OF NON-COMMUNICABLE DISEASES

ASHEVILLE, N. C.

Dear Doctor:

A mild climate, rest, diet, baths and ideal surroundings combined with Osteopathic care is what your post-influenza and chronic cases need.

Our profession needs equipment and endowment for research work. All profits of OTTARI go ultimately to the A. T. Still Research Institute. No dividends nor salary go to the management, and our books are open to any accredited representative of the Trustees of the R. I.

Any patient can be well cared for at OTTARI for forty dollars per week—including all professional services, board and room—but we have suites and choice rooms at higher rates. Private and semi-private nurses cost extra, but nurses are provided at no extra cost to carry out all orders of the physician.

Help your patients—who will thank you, help your profession—that has already helped you, by recommending OTTARI.

Descriptive literature on application to  
OTTARI,

R. F. D. No. 1,

W. Banks Meacham, D. O., Asheville, N. C.  
Physician-in-Charge.

inafter set forth. The Department shall have the power to finance these institutions as the best business methods may dictate. The Department shall receive all monies from the schools and allied hospitals and direct its expenditure.

The Department shall appoint a president for each institution, with or without remuneration, who shall be responsible for the methods of teaching the student body under his charge and the nurses in the Nurses' Training School. The Department with the president of each institution shall select and dismiss the members of the faculty. Appointments on the faculty may be made with or without remuneration, and no individual who displays in the open or in secret the M. D. degree shall be eligible. Student assistants shall be appointed and dismissed by the president upon recommendation of the faculty member in charge of that department.

The Department shall employ a secretary or business manager for each college and allied hospital who shall conduct the business of the college and hospital, viz: the financial relationship of the student and the college; the financial relationship of the patients and the hospital or clinic;

the hiring of competent labor to keep the property in shape and repair; the purchase of current supplies or the requisitioning of the same from the secretary of the Department, and such other matters as may arise in the conduction of the business affairs of the college and allied hospital.

The Department shall appoint, with or without remuneration, a superintendent for each allied hospital and nurse's training school, whose duty it shall be to conduct the hospital and training school upon an up-to-the-minute basis according to the plans agreed upon by the Department.

The Department shall appoint, without remuneration, a Board of Regents for each college and allied hospital, consisting of five members, who shall be members of the National, State and Local organizations, for a term of one year subject to re-appointment, but for not more than three years in succession. They shall elect their own chairman and secretary, meet once a month for the transaction of such business as may come before them. They shall serve in an advisory capacity to the president of the college, the superintendent of the hospital, and the business manager. They shall at intervals, separately or to-

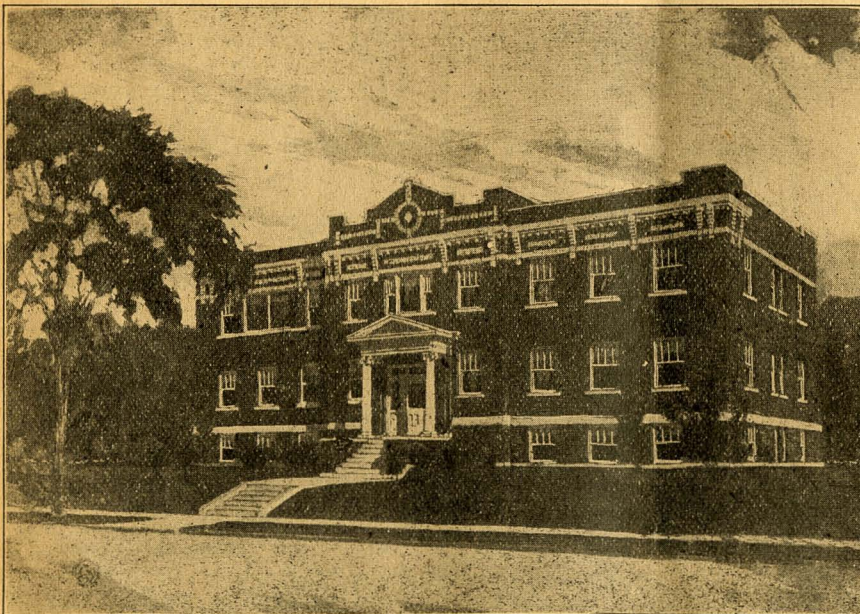
gether, visit the various classes with the object of noting whether the professors are adhering to the teaching of their subject as set forth by the Department and to advise improvements to the Department. They shall visit and inspect the hospital with the object of noting the conduction of business and the character of the same, advising improvements to the Department. The Board of Regents shall report at least once a month to the Department as to their work and as often as necessary to keep the college and allied hospital up to the highest point of efficiency.

The Department shall seek endowments to the several colleges and allied hospitals and shall carry out the spirit and letter of the endowment. They shall with all surplus funds remaining above current and financing expenses build endowments for the several colleges and allied hospitals.

The Department shall in connection with the Bureau of Publicity carry on a paid and unpaid advertising campaign each year to bring Osteopathy to the attention of all who are desirous of pursuing our course of study.

The Department shall require of all faculty members eleven months of

(Continued to page 143)



## NOW OPEN The Laughlin HOSPITAL

**Kirkville, Missouri**

The Laughlin Hospital of Kirkville, Missouri, has just been completed and is now ready for your patronage. The hospital, which was built at a cost of over \$50,000, is a modern fireproof structure of forty-two rooms. Thirty-five of these rooms contain beds for patients. The building is built of the very best material and has every convenience that can be put in a hospital of this size. An electric automatic elevator has been installed, which means a great convenience. There are two operating rooms, one for general surgery and the other for orthopedics.

Dr. Laughlin and his associates will do an osteopathic and general surgical practice. assistants to help him in the various departments, of which there are the following:

- |                |                     |                    |                                   |
|----------------|---------------------|--------------------|-----------------------------------|
| 1. Osteopathic | 3. General Surgical | 5. Gynecology      | 7. Proctology and Urology         |
| 2. Orthopedic  | 4. Obstetrics       | 6. Nose and Throat | 8. X-Ray and Laboratory Diagnosis |

A Training School for Nurses will also be maintained, with a separate building for the nurses' home

For further information address

**DR. GEORGE M. LAUGHLIN**

**Kirkville, Missouri**

**PHYSICIANS FIGHT OSTEOPATH BILL**

**Practitioners From All Parts of State Make Senate Committee Hearing Lively**

Trenton, March 22.—Physicians of the old and new school, members of the State Board of Health, and local boards of education, and osteopathic practitioners appeared at a hearing of the Senate committee on public health in the Senate chamber this afternoon and discussed the merits and demerits of nine measures pending before the Legislature. Both the floor and galleries of the upper branch were overcrowded, and frequently Chairman Haines of Camden threatened to discontinue the hearing unless the cat-calls, hisses and applauding terminated.

The first measure discussed was that by Mr. Hyland, which has already passed the Assembly, amending the osteopathic law by governing the issuance of licenses without examination to those licensed in other states. The principal speakers in favor of the bill included Dr. Arthur W. Flack, dean of the Philadelphia School of Osteopathy; Dr. R. K. Smith, of Boston, and Dr. E. S. Comstock, of Chicago.

Among the Camden county physicians present were Dr. H. L. Rose, chairman of the welfare committee of the State Medical Society; Dr. Grafton E. Day, Dr. J. Watson Martindale, Dr. William A. Wescott, Dr. H. H. Davis, Dr. Harry Bushey, Dr. Thomas B. Lee, Dr. Alexander McAllister, Dr. E. G. Hummell, Dr. Howard F. Palm, Dr. O. S. Saunders, Dr. B. F. Horning, Dr. Edward Pechin, Dr. F. W. Shafer, Dr. Levi B. Hirst, Doctor Madden and Doctor Kramer.

In brief, the contentions made by the physicians opposed to the bill were that the educational standards should be retained irrespective of the profession sought to be protected, and that the public should be protected. It was argued that the osteopathic practitioners sought to reduce the standards in the bill under consideration and that members of this profession were recognized a few years ago with the distinct understanding that they would not later come back and petition the Legislature to permit them to administer drugs and perform surgical operations. It was with this understanding that the requirements for recognition were not made so

stringent as those of the medical profession.

Dr. Flack outlined the qualifications necessary for a student to enter the Philadelphia institution, and argued that they were no different from those required for entrance to medical colleges. Students of his school, Doctor Flack said, use standard textbooks similar to those now in use in the University of Pennsylvania, Johns Hopkins and other prominent colleges. The preliminary requirement for entrance, Doctor Flack informed the committee, was that a student have a diploma from a recognized four-year high school or its equivalent, this being the same as is required of medical students.—Phila. Ledger, Mar. 23, 1920.

**PHILOSOPHY OF MANIPULATIONS**

**Dr. A. T. Still**

The philosophy of manipulations is based upon an absolute knowledge of the form and function of all bones belonging to the bony framework of the human body. We must know the position and purpose of each bone and be thoroughly acquainted with each of its articulations. Without this knowledge our work will be a failure. Simply to know that our heads are situated upon the atlas and the atlas on the axis, that we have seven bones in the neck, twelve in the dorsal region and five in the lumbar is of little use. We must have a perfect image of the normal articulations of the bone or bones that we wish to adjust. We must be critically certain that we know all articulations of the bones of the whole system. We must know how the blood is supplied and when that arterial blood has done its work we must know how it returns and what would be an obstruction that would prevent its return. Without this information our opinion as to cause of variations from the perfectly healthy condition is without foundation, for our mechanical detection has failed to acquaint our minds with the cause that produces the abnormal condition in a perfectly healthy system. Thus a failure to give relief results in disappointment. The osteopathic mechanic must remember that Nature is a living critic and the answer must be yes or no. A normal image of the form and function of all parts of the body must be seen by the mind's eye or our work will condemn us.

Variations of the neck produce spasms in some persons, headache, dizziness and many other troubles in others. Strains,

**OSTEOPATH'S COATS**

**Sold on a GUARANTEE of Perfect Satisfaction or your Money Refunded.**

Our guarantee covers everything; quality, workmanship, fit and style. You take no risk.

All materials are thoroughly shrunk and all colors fast.



STYLE 18

**We Make 25 Different Styles**

Of over 40 selected patterns. Express charges prepaid to all points.

Samples and instructions for measuring sent FREE.

**M. WEISSFELD MFG. CO.**  
335 BROADWAY NEW YORK CITY

NOTICE—We have no branches and are not connected with any other firm. Patrons who give orders to our agents should see that the order goes to us.

partial dislocations or other variations from a perfectly normal articulation of any of the lower four cervical or the upper four dorsal vertebrae have much if not all to do in producing shaking palsy of the head and arms, and a number of other diseases. From occiput to coccyx you must know right from wrong or the results will not give satisfaction. Now, this is a very interesting subject and you must give it the most careful attention or you are not worthy of the confidence of the afflicted.

For thirty-five years I have labored to acquaint myself with the exact form of every bone that belongs to the framework of man's whole body. I have given attention not only to the form of each bone, but also to why it is different in form and action from all other bones; to its exact location and articulation, so that when it is removed from its place I know just where it belongs and how to take it and place it in the position that the builder intended for it. For days, months and years, and many of them, I have examined and criticised the normal and the abnormal position of all bones of the whole system. By this extensive study I have formed in my head a perpetual image of every articulation in the framework of the human body.—Osteopathy Research and Practice.

**THE BIGGEST CONVENTION  
JUNE 28-JULY 3  
CHICAGO**



# Osteopathic Truth

A MONTHLY JOURNAL OF  
OSTEOPATHIC PROGRESS

EDITED AND PUBLISHED BY

PRACTICING OSTEOPATHIC PHYSICIANS  
FOR THE OSTEOPATHIC PROFESSION

**President**

H. M. Vastine, D. O. . . . . Harrisburg, Pa.  
102 Locust St.

**Vice-President**

Richard Wanless, D. O. . . . . N. Y., N. Y.  
347 Fifth Ave.

**Secretary-Treasurer**

Oliver C. Foreman, D. O. . . . . Chicago, Ill.  
27 E. Monroe St.

Address all correspondence to  
**THE OSTEOPATHIC TRUTH PUBLISHING CO.**

1421 Morse Ave., Chicago, Ill.

**Editor**

Earl J. Drinkall, D. O. . . . . Chicago, Ill.  
1421 Morse Ave.

**Business Manager**

George W. Goode, D. O. . . . . Boston, Mass.  
687 Boylston St.

**Circulation Manager**

H. W. Shain, D. O. . . . . Chicago, Ill.  
1421 Morse Ave.

**CONTRIBUTING EDITORS**

George W. Reid, D. O. . . . . Worcester, Mass.  
Carl P. McConnell, D. O. . . . . Chicago, Ill.  
Francis A. Cave, D. O. . . . . Boston, Mass.  
Geo. F. Burton, D. O. . . . . Los Angeles, Cal.  
Louise A. Griffin, D. O. . . . . Boulder, Colo.  
Nettie O. H. Stingle, D. O. . . . .  
W. Banks Meacham, D. O. . . . .  
Asheville, N. C.  
Herbert E. Bernard, D. O. . . . . Detroit, Mich.  
E. Florence Gair, D. O. . . . . Brooklyn, N. Y.  
Joseph H. Sullivan, D. O. . . . . Chicago, Ill.  
E. R. Booth, D. O. . . . . Cincinnati, O.  
Walter J. Novinger, D. O. . . . . Trenton, N. J.  
Asa Walmsley, D. O. . . . . Peterborough, Ont.  
F. J. Feidler, D. O. . . . . Seattle, Wash.  
Ada Achorn, D. O. . . . . Boston, Mass.  
A. L. Evans, D. O. . . . . Miami, Fla.  
Asa Willard, D. O. . . . . Missoula, Mont.  
Josephine L. Pierce, D. O. . . . . Lima, O.

SUBSCRIPTION PRICE \$1.00 a year,  
in advance. Single copies 10 cents.  
Back numbers not over three months  
old, 25 cents each; over three months  
old, 50 cents each.

Instructions for RENEWAL, DISCONTINUANCE, or CHANGE OF ADDRESS should be sent in two weeks before they are to go into effect.

PRESENTATION COPIES. When making a subscription for a friend and you desire the magazine to stop at the end of the year, please make a statement to that effect when addressing us.

**ADVERTISING RATES**

Advertising rates will be submitted upon application to the Business Office in Chicago.

APRIL, 1920

I am not bound to win, but I am bound to be true—I am not bound to succeed, but I am bound to live up to what light I have—I must stand with anybody that stands right; stand with him while he is right and part with him when he goes wrong.

—Abraham Lincoln.

## Public Education Not Only a Duty, But a Privilege

The Greatest Seller Is the Greatest Advertised Article

Our attention has just been called to the fact that the hangnails in Missouri had a convention recently in St. Louis, and there appeared more articles and items in the St. Louis newspapers about their work than have appeared about osteopathy in five years.

The doctor who wrote us was very indignant about our lack of public education, and he hoped we would be able to get into the newspapers of the country some excellent articles during our next convention.

### Whose Fault?

The question immediately arises in not only your mind but ours, as to whose fault it is that there are so few articles on osteopathy appearing in the papers of the United States. Frankly, it is yours and mine. Up until a year ago we hired one of our members to have charge of the national publicity work. Since the office was abolished and put under the Department of Public Affairs, nothing has been done along this most important line. We realize, since we are in the same boat ourselves, that most of the doctors are too busy, but such a policy of silence will not gain for our profession new students.

### National Campaign

We are pleased to note that the Forward Movement, with Dr. M. L. Hartwell as chairman, has started a national campaign of education with the primary object of getting students for our schools. Co-operation, they say, is the life of trade, and unless the doctors of the country co-operate with Dr. Hartwell, his campaign will be almost worthless.

It is possible for him to purchase the names and addresses of some 75,000 high school students in the United States, and through the purchase of those lists he can mail directly to the students, without having to burden the doctor in that particular city to secure a list for him.

We have suggested to Dr. Hartwell that he purchase this list, mail his literature, and charge one-half to the state association, and let the state association collect a certain amount from every member and non-member in that particular state.

### Newspaper Publicity

We know, because for four or five years we have done it, that you can have newspaper publicity practically for the asking. The main thing is the time of someone to prepare the articles for the newspaper. You are aware that any items or articles that you have given your local paper have usually been published, particularly if it is an item of humanitarian interest.

We must have a publicity bureau of national scope, a real "honest-to-goodness" one; and if we toot our horn as loud as we ought to (for we have the greatest implement against disease in all the wide world), we can not only turn this old world inside out for osteopathy, but we will overrun our schools with students.

Think of it, doctor, and instruct your delegates to the House of Delegates of the A. O. A., in order that at the next annual meeting they may formulate plans to have what we should have, a real national educational publicity department.

### New England Convention

One of the big annual events in the East is the New England Convention. This year it will be held at the Hotel Lenox, Boston, Mass., May 7 and 8.

The program committee, of which Dr. J. Oliver Sartwell is chairman, has already lined up several star attractions. Among those to appear will be Dr. W. Banks Meacham, who will talk on "Physical Diagnosis." Dr. C. E. Amsden will discuss "Auto-Intoxication and Colonic Stasis." Dr. J. Ivan Dufur will talk on "Nervous and Mental Diseases." Dr. T. R. Thornburn will talk on "Physical Diagnosis."

There is to be a big social event Friday evening, the 7th, at which it is planned to have many surprises. Dr. George W. Goode, chairman of the committee on arrangements, will have charge of this novel feature. The meeting promises to be the best in the history of the association.

### REMOVAL OF DR. BROCK

Dr. William W. Brock, formerly of 134 State Street, Montpelier, Vermont, has recently removed to Suite 7-9, Union Block, State Street.

**A "MULLIGAN STEW"**

**Asa Willard, D. O., Missoula, Mont.**

In a recent issue one of our journals recorded the fact that a gentleman in New York had brought suit against an osteopath for some thousands of dollars' damages. The newspapers chronicled the event. The gentleman who brought the suit, it is stated, had a slight cold when he went to the osteopath, but when he went away he seemed to figure that during his seance with the doctor he had accumulated enough beside the cold in the way of pains in the chest, muscles, etc., to furnish action for damages. The letterheads of the Doctor read, Dr.—, M. D., D. O., D. C.

When we used to go out camping at the end of the week, we would take all the potatoes and other vegetables, all of the meat scraps and leftovers of every variety, put them all together and make "Mulligan Stew" out of them. I often think of this stew when I think of the inclinations and practices of some that osteopathy is credited with.

It is quite possible that the application of the combination of principles of practice like that represented by M. D., D. O., D. C., might produce bodily results that could be accounted for on the same basis as the little girl accounting for her stomach ache.

She said she had been eating angel food and devil food cake, and she guessed the devil and the angels were fighting in her stomach.

But did you ever notice that when any person practices a what-not combination of practices and gets into trouble, it is always osteopathy that gets the worst of the publicity. I am willing to go the limit in helping any real osteopath who needs help, but whenever a fellow gets into practice trouble that blows to the breeze the M. D. (medical)—the D. O. (osteopath)—D. C. (fake osteopath)—banner, on general principles my sympathies are "agin him."

**ANTI-COMPULSORY VACCINATION LEAGUE FORMED IN ST. JOSEPH, MO.**

In January the Board of Education, acting on the recommendation of the St. Joseph City Board of Health, issued an order that all school children and school employees be vaccinated or excluded from school for a period of thirty days. The City Board of Health had declared an epidemic of smallpox to exist in the city, pre-

sumably because business was a little slack for the M. D.'s of the city. The flu epidemic had not been staged up to that time, and it looked as though we might get by without one. The smallpox epidemic worked very well, as thousands of school children and school employees patronized their family physicians for vaccination, greatly to the benefit of the physicians and much to the detriment of the health of the children and others, as several hundred were known to be absent from school due to the sickness caused by the vaccination; and of course many will be patients of the doctors for many months to come, due to the after effects of the poisoning of the blood and lymph streams by the virus, which it has been repeatedly shown is never free from other pathogenic micro-organisms than the smallpox virus.

The parents of something like one thousand school children chose to have their children forego the education they might be able to receive during the thirty days' exclusion from school for not being vaccinated, and kept their children at home rather than run the risk to their life and health incident to vaccination.

Several meetings were held by the citizens of the city and an anti-compulsory vaccination league was formed, and men and women of the city, standing high in social and civic circles, were elected officers. Several hundred dollars were raised to fight the vaccination order and to have the compulsory vaccination ruling removed from the statutes of the state.

Mrs. Lora C. Little, secretary of the American Medical Liberty League, with headquarters at 64 East Van Buren Street, Chicago, Ill., was brought to St. Joseph by the anti-vaccinationists, and she delivered three admirable addresses opposing compulsory vaccination and state medicine in general. She acquainted the people of St. Joseph with the fact that has long been known by our profession, that the A. M. A. is bending every effort to save itself and its practitioners from the inroads of saner therapeutics by having compulsory medical inspection and enforced allopathic treatment in the Army, Navy, public institutions, schools, etc.; and now they are insuring inoculation of all young men of the nation through the compulsory military training movement.

Several bills are now before Congress which, if enacted, would be just as drastic as the Owen bill, which

**MASSACHUSETTS COLLEGE FUND**

**Help Lift the School from M. D. Control—\$20,000 at Least Needed**

**SUBSCRIBERS TO THE FUND:—**

Earl J. Drinkall.....	\$100
George W. Goode.....	100
J. Oliver Sartwell.....	100
W. Arthur Smith.....	100
Helen G. Sheehan.....	100
Geo. W. Reid.....	100
C. O. Fogg.....	100
R. K. Smith.....	100
H. H. Pentz.....	100
W. W. Fessenden.....	100
Elizabeth F. Kelley.....	100
Charles Grapek.....	100
Peter J. Wright.....	100
C. L. Watson.....	100
M. B. Barstow.....	100
Charlotte Richmond.....	100
Laura Meader.....	10
Ralph A. Manning.....	100
C. A. Lindquist.....	25
M. L. Hartwell.....	2
F. E. Moore.....	2
Edgar S. Comstock, Secretary	
Chicago College.....	10

\$1,749

180 more needed

**HURRY!**

Read the editorials in November "Truth."

Here is a constructive plan, a chance to make one of our colleges stronger and better, more Osteopathic.

It is your move!

Which way?

How much?

was defeated some time ago. It is up to the osteopathic and other schools of drugless therapy to get behind these movements of the liberty-loving laity and insure Americans may have the choice of their physician and system of therapeutics and prophylaxis as the constitution guarantees their freedom of choice of religion.

The St. Joseph Medical Freedom League will welcome any encouraging letter or contribution from members of our profession.

Communications to the League should be sent to Mrs. R. N. Malone, Secretary, Medical Freedom League, 3316 Renick Street, St. Joseph, Mo.—Central States Osteopath.

**SOMETHING TO THINK ABOUT!**

Are you a real Osteopath or are you like a child, rummaging in the junk pile of the drug school?—McCole.

**CALIFORNIA IS TRYING A "CIRCUIT CLINIC"**

**San Diego County Association Tries No. 1**

The first Circuit Clinic was recently held in San Diego, under the auspices of the San Diego County Osteopathic Association, Dr. T. J. Ruddy, Surgeon at the College of Osteopathic Physicians, Los Angeles, California, being present.

A well equipped operating room had been arranged for at one of our local hospitals.

Many clinic patients were examined and much interesting information relative to the treatment of the different cases was given. Dr. Ruddy, in his usual clever and instructive way, held his listeners, the local Osteopaths, during the entire clinic.

Every Osteopath present was more than pleased with the results of the first clinic.

Arrangements have been made for Dr. Ruddy to return to San Diego within a few weeks for private examinations and operative work.

In the evening at nine o'clock, a splendid banquet was served in Rudder's Cafe, after which Dr. T. J. Ruddy delivered his most interesting lecture upon the "Importance of Physical Examination and Observation of School Children." This was followed by outlining the work for the future Clinic.

Dr. Isabel Austin, the efficient secretary of the Association, gave a most

interesting talk upon the "Disadvantages of the Use of Morphine."

Then Dr. Vernon Lee impressed his listeners very much with his hobby, "Sanitation."

The meeting adjourned at midnight.

**TO SEND PETITION TO GOVERNMENT**

**Mayor Macbride, Brantford, Addressed the Anti-Vaccinationists**

At a meeting of the Anti-Vaccination League, held in the Allen Theatre, St. Clair Avenue, last night, a resolution of disapproval of the action of the Provincial Department of Health in seeking to make vaccination compulsory, and a declaration that thereby a great deal of harm had been done to Toronto, was passed, the resolution going still further and calling upon the Government to make it illegal for the department ever again to issue a compulsory order, and recommending the substitution of sanitary engineers for medical officers of health.

The meeting also watched with interest an exhibition of lantern slides purporting to show the preparation of vaccine and its effects. Mr. F. P. Millard, D. O., an osteopath, gave a description of what he claimed vaccination causes in the way of throat trouble and its effect on the lymphatic system. He also declared it caused trouble in the groin, and made the statement that vaccination on the leg had been discontinued by order because of this trouble.

Mayor Macbride, M.P.P., of Brantford, who was present, gave an address in which he emphasized that he thought the vaccination order undemocratic, and stated that when it had been made compulsory for the school children of Brantford to be vaccinated or remain at home he had promised to open classes in public halls for the unvaccinated children, action which he declared was followed by the rescinding of the compulsory order.—The Mail and Empire, Toronto, Feb. 9, 1920.

**"MERIT BEGETS ENTHUSIASM"**

Osteopathic Truth, Chicago, Ill.

Your little magazine came today and as we are in the midst of a regular South Dakota blizzard, I have had time to read it through carefully and find some very interesting reading in it. Therefore, while it's fresh in my mind, I am sending you a check to insure its coming regular. We need more such magazines.

We have passed through another "flu" epidemic here, the same as most other places, but in a more mild form than a year ago. As usual "ten fingered" Osteopathy came through with flying colors and made more friends or the cause. The time is coming when friend M. D. will be on the outside looking in, during these epidemics.

Wishing you the greatest of success with your little magazine, I am,

Very truly yours,  
J. G. FOLLETT,  
Watertown, S. D.

**Your Success in 1920 Depends on How Well You KNOW Osteopathy**

**Dr. Swart's Spine and Rib Fixer, \$3.00**

Prompt Delivery of the following books:

"RESEARCH AND PRACTICE OF OSTEOPATHY" A. T. STILL  
Cloth, \$6.00 Leather, \$8.00

"POLIOMYELITIS"  
By F. P. Millard, D. O. - - - - - \$2.00  
Nothing Like it in the World

AUTOBIOGRAPHY OF A. T. STILL  
\$2.50  
Every D. O. should know these books from cover to cover

"FOOD FUNDAMENTALS"  
By E. H. Bean, D. O.  
One Copy - - - - - \$1.75  
Six Copies - - - - - 9.00

STRAP TECHNIC  
By Jos. Swart, D. O. - - - - - \$2.00  
The Straps - - - - - 4.50  
Save your back

HISTORY OF OSTEOPATHY  
By E. R. Booth, D. O. - - - - - \$4.00  
Know the history of your profession

Get Your Friends to Subscribe for

**"OSTEOPATHIC TRUTH"**

**MAKE THE DEPARTMENT OF EDUCATION REAL**

(Continued from page 138)

time. After the close of the school year, the Department shall conduct a Teachers' Training or Conference School, which all members of the faculty of the various schools are required to attend for uniform concerted study. Every subject taught in the college curriculum shall be reviewed, if possible, by the best talent obtainable in order that each teacher upon returning to his respective school will teach the subject as it is taught in the other colleges, thereby giving uniformity of education. The Department may at its discretion send the faculty members to some college or university for uniform instruction. The tuition for this special work shall be paid by the Department. Practitioners may attend these Conferences or Training Schools upon the payment of a fee agreed upon by the Department.

The Department may in conjunction with the A. T. Still Research Institute conduct a teacher's training school for those who would desire to teach in the colleges and for the training of public lecturers.

The Department shall do all in their power to advance the teaching of Osteopathy as desired by our beloved founder, Dr. A. T. Still, both in the schools owned by the Association and those under private control.

**The Analysis**

We might use the United States Steel Corporation as an illustration. First, there are the stockholders scattered all over the world. The stockholders elect a Board of Directors and they select the men who will head the different factories throughout the world. It matters not where the factory is located, on the Iron Range or in Calcutta, India, the control is from the Board of Directors as represented by Judge Gary, its chairman in New York.

The above amendment will make every member of the American Osteopathic Association a stockholder in fact in our schools. Until that is brought about no one school has the right to say it is owned by the profession.

You stockholders then elect your Board of Trustees and they in turn elect the Department of Education who control and govern our seven or eight factories located in various parts of the United States.

**Our Factories**

Our schools and hospitals are fac-

ories turning out students and cured patients. There is practically little difference between our schools and a steel foundry. We take the uneducated young man or woman and turn them out a few years later as the finished product—a doctor. You know the other.

Our factories should be run on a strictly business basis and they can just as easily be run together as separately, in fact more economically because when buying supplies in quantity the cost is reduced. All factories turning out the same finished product require the same kind of machinery to do the work, therefore, centralized power for our schools will advance them by leaps and bounds. As the factories earn and return dividends so will the stockholders be benefited.

The surplus cash earned by our factories, instead of being converted into dividends of cash, will be used to build endowments. Along with the advertising campaign to get students, of which you do not contribute one cent, as it is paid for by the schools, your business will be increased, if you deliver the goods when a patient comes to you.

**Research Institute**

Under this plan we would provide for a greater use of the A. T. Still Research Institute. The Institute would practically become a Training School for Teachers and Lecturers. The individuals who work in the laboratories of the Institute can be sent to any of the schools as substitute teachers and later, if they desire to teach, may be placed on the faculty to fill a vacancy. A nation-wide advertising campaign will call for lecturers and these same individuals can be sent over the country to give lectures.

The Research Institute becomes a producing factor in the preparation of histological, pathological, and biological slides. Having this work done in one central place would save hundreds of dollars now spent by the different colleges.

**A Central Location**

We would suggest that the general offices of the A. O. A., the Department of Education, and the Research Institute all be located under one roof in Chicago. Chicago is centrally located and conference expenses will be lowered by the equalization of railroad distances. Chicago would lessen the time now required on a longer mail haul, which would put the Association and its members in closer touch. This point can be worked out later.

**Don't Talk—Do**

The condition existing in our schools and the profession demands real action. Each of us are vitally interested and should give these problems the best that is in us to give, in order that we may advance.

We have opened the question for you to discuss and let us during the next few months give the matter our thoughtful attention. Please feel free to write whatever may be on your mind with reference to the solution of these problems. Don't put the matter off until next week, but sit down and write us your views today for our next issue. Let's put our shoulders to the wheel and lift our science to the mountain top where it should be—the flaming beacon to all suffering humanity.



**Looking in the Glass  
or  
Looking in a Book**

If "Concerning Osteopathy" was at her hand—she would be reading it while waiting for treatment.

It has a convincing appeal. It is just what you want in the hand of every patient.

It is just what your patient wants, too.

"Better convince one than to talk to many." Order a hundred now.

**PRICE LIST**

(Prepaid in U. S. and Canada)

Copies	Leather	Cloth	Paper
100...	\$150.00...	\$100.00...	\$ 50.00
50...	77.50...	52.50...	30.00
25...	40.00...	27.50...	16.25
10...	16.50...	11.50...	7.00
1...	1.75...	1.25...	.75

**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.

\$10.00 with the order and the balance in 30 days 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.

# Food and Diet As Related to Osteopathic Practice

Edited by Dr. E. H. Bean, 71 East State Street, Columbus, Ohio

## SERIES No. 5

Feb. 10, 1918.

Dear Doctor: I think I have solved the milk problem. I have changed to a dairy that can deliver the milk unfrozen and will start to use it tomorrow. It will be delivered at 6 o'clock in the evening, giving us fresh milk for the night feeding, and then we will hold it over for morning and noon feeding. I did not like to change for the other milk seemed to agree fine, but, of course not when it was frozen.

The baby's skin was quite bad on her face and neck for several days, but as soon as the milk was normal she improved. I notice that too much warmth irritates the skin very much and I try to keep an even temperature wherever she is. She is better at night now, though occasionally has a restless one. I look for a decided change after using the unfrozen milk for two or three weeks. The milk would be very slightly frozen every little while, then frozen badly, then normal, etc., and no doubt that was the cause of so much restlessness all the time.

The stools have not been so good as they were, but I could hardly expect them to be better. I give her the petrolatum and it helps wonderfully. The skin on her body is better in spite of bad milk. Every day I give her an air bath as suggested, and think it helps her, though she cries most of the time. So far I leave her nude from

thirty to forty minutes, and I do this after her morning bath.

She takes seven and one-half to eight ounces of milk at each feeding, and has had no undigested curd since I last wrote. Her gain for the third week was about five ounces. I will write again in a few days, after I have tried out this new milk.

Feb. 18, 1918.

Dear Doctor: Since the last time I wrote I have had the baby on the milk from the other dairy. She had a very bad upset about the third day, due, I think, to the vegetable juice. I have noticed at times it would upset her, so I have discontinued it entirely, also the fruit juice for the time being, as she would regurgitate it occasionally, and I thought it would be best to just try out the milk alone.

The milk seemed to be deficient in cream, so I have been using top milk; that is, all the cream from the quart of milk. But I see that is a mistake, as top milk is harder to digest. I have noticed her digestion has been slow getting regulated since I changed dairies. I am now giving most the mixed milk and cream diluted one-fourth, and I hope to have the bowels better soon. She has lots of gas lately, possibly due to the change. She has not been resting so well at night. For a time she was having two bowel movements a day, but now only one. Should there be two movements a day?

And am I doing right about the milk? After her upset last week her face and neck were very red and rashy and irritated her terribly. Just before starting on this milk her weight was nine pounds and one ounce, while yesterday (a week later), she weighed eight pounds and nine ounces. I suppose this was due to the change. Is there any special amount of cream she should be getting at a feeding?

Feb. 25, 1918.

Dear Madam: I think you are doing the best thing just now. Continue to give the full milk, diluting it with water as you are now doing. Cream makes the milk more difficult of digestion, and in most cases it is best to use no more of it than is afforded by the full milk. Occasionally, however, a child will get along better if some additional cream is given. This must be determined by experience. There is no special amount of cream to be given. When the food is acting all right, then if a gain is not noticed soon, the amount of cream may be slightly increased until a gain in weight results.

It seems to me from the reports you are sending in that the child's digestion is weak and slow. And this probably accounts for the trouble with the fruit and vegetable juices. I am inclined to think the stomach is not entirely free from food when these juices are taken. So you are right in leaving them out of the dietary for the present.

Two bowel movements a day are better than one, but as long as there is one thorough bowel movement, take no extra measures to secure another one.

The great secret, if there be a secret, in handling these little folks so as to keep them healthful, is to not burden the digestive organs and ruin their efficiency. Increase in weight is a secondary matter for a limited time. When the digestive organs are disturbed, as your child's have been by the change in diet, then a temporary loss in weight should be expected. But, of course, it should not be that way for a long time, and only for a short time, until the organs have righted themselves and become adjusted to the new food. While this is being done, less food must be given and food with less nutrition in it.

## Osteopathic Educator

That is what The Herald of Osteopathy is. It is Published Monthly Especially for the Laity.

As a Monthly Visitor to Your Patients it can't be beat.

It Is Neat, Attractive, Up-to-date, Convincing and comparatively Inexpensive. If used Systematically, It will help to put Osteopathy on a high and dignified plane in your Community.

*Sample Copy and Terms Upon Request.*

**Address: F. L. LINK, Kirksville, Missouri**

## SOME THINGS THE DOCTORS CANNOT DO

Discussing the Latest Rockefeller Gift, High Medical Authority Says That No Specific Can Be Found for Tuberculosis, Cancer, or Pneumonia.

By REMSEN CRAWFORD

Discussing Mr. Rockefeller's gift of \$30,000,000 for medical education and research, Dr. William H. Porter, for many years professor in pathology and general medicine at the New York Post-Graduate Medical School and Hospital, remarked the other day that no specific medical cure for consumption, pneumonia and cancer ever could be discovered. He said that the foremost men of medical science who had been delving for years to the roots of these blights no longer looked for such a specific remedy in the realms of therapeutics and pharmacy.

Dr. Porter does not share the optimism of Dr. Mayo, who recently asserted that since the civil war fifteen years had been added to the average life of man by innovations in medical and surgical advance. He holds that the chief source of decreased mortality, or increased longevity, is due to the increased knowledge concerning the hygiene and diet of infants. Reciting the progress that has been made in rural and urban sanitary regulations, he says, "Our sources of milk supply have been clearly scrutinized, until now enteric disorders in epidemic form are almost unknown," and this, he thinks, is one of the most important of all reasons for longer life today. Dr. Porter admits the failure of his profession to triumph over the more destructive diseases.

In response to a query about his views of the Rockefeller gift, Dr. Porter said:

"Much good has already resulted from the funds established by Mr. Carnegie in his lifetime, and by Mr. Rockefeller, for the advancement of medical science, and I am sure that these later donations on the part of Mr. Rockefeller of \$20,000,000 to the General Education Board, created by him, to be expended for medical education and research, and of \$10,000,000 to the Rockefeller Institute for Medical Research, will go a long way toward enabling the American school of medicine to take its rightful place among the enlightened nations of the world.

"I am of the opinion, however, that the chief benefits which have arisen from these endowments thus far con-

sist in the improvement of our laws requiring better qualifications on the part of applicants for a license to practice medicine. We still need more legislative safeguards, and there is room for reform in the matter of adjusting the curriculum and improving the clinical facilities of the average medical college.

### Limited Field of Help

"In the matter of research there is greater need today than ever for ample funds to extend the great work of experiment and investigation. But I believe it should be acknowledged at the outset that no research can ever possibly discover a specific remedy which will cure such diseases as tuberculosis, pneumonia and cancer. I don't believe that the experts Mr. Rockefeller has commendably brought together on his staff of medical investigators will waste much of their time, or much of his money, trying to find a cure for tuberculosis and pneumonia, for the reason that it is now a known fact that anything powerful enough to kill the germ may be equally destructive to the patient.

"With diseases which we call 'self-limited' it is now accepted as true that we can shorten their duration and decrease their intensity. I assume, therefore, that Mr. Rockefeller's scientists will direct their research in this direction.

"This is not pessimism. It is commonsense. We all remember what a thrill of elation took hold of the medical profession, and what a feeling of satisfaction seized the civilized world, when Dr. Koch, famed for his mastery of bacteriology, announced that he had discovered a cure for consumption. Many doctors and scientists took him at his word. His brilliant achievements in the past made it imperative that he should be taken seriously. In my practice and my work at the Post-Graduate Medical School I made it clear then that we were not justified in believing that any specific 'cure' could be elaborated for any pathological condition, although nature does develop antibodies and defensive proteins, as well as encysting processes and other means of self-limiting certain conditions which remove or overcome toxins, and, in this way, facilitate a restoration to normal conditions.

"In connection with my work at the Post-Graduate Medical School and Hospital I insisted that I did not approve of any experiments involving human life with Dr. Koch's so-called cure. Years have passed, and the Koch 'remedy' has passed with the years, and so

have all the 'remedies' offered by lesser lights."

"But why despair?" the interviewer added. "Isn't there a remote possibility that some day a germ culture may be found which will spare the life of the patient? Had not the medical profession given up all hope in the case of diphtheria and in the case of tetanus, and did not research bring at last the antitoxin which affects a profound amelioration for these diseases?"

"It required long years of medical research to find the germ of consumption, and longer to discover the germ of pneumonia," Dr. Porter replied, "and many long years have been spent in the arduous search for some specific for these germs. In the case of diphtheria, antitoxin does mitigate the severity of the disease. But, even here, the patient most undergo the strain of a well-nigh lethal dose. It is well to add in this connection that antitoxin is chiefly effective in the prevention and removal of the membrane exudation, which is the principal cause of death from uncomplicated diphtheria.

"It is just the opposite in the case of a new serum now used against the typhoid germs. After a patient has become infected with the typhoid germ it is of little avail to inoculate that patient with the anti-typhoid serum. It acts well, however, as a vaccine, and produces immunity from the disease quite as effectively as the smallpox virus.

"The pneumococcus, or germ of pneumonia, was discovered by Dr. Friedlander in 1883. Since that time countless experiments have been made in the hope of finding a specific cure. Dr. Sternberger, our noted army surgeon, has played a conspicuous part in this research work for a pneumonia cure. We have all heard the claims of enthusiasts to the effect that they can cure pneumonia by abortive means—by eliminating the disease through the liver, and so forth. This claim is confused either with preventing or with decreasing the intensity and shortening the duration of the disease, for we do not have an actual pneumonia until the air sacs are filled with an inflammatory exudation, and the only way to remove this is by nature's process of fatty degeneration and liquefaction, the liquid product being removed from the lung only by being coughed up, or by being absorbed through the lymphatic channels. Once absorbed into the lymphatic channels these products are eliminated through the liver and kidneys.

"Where Mr. Rockefeller's donation will work its greatest good will be in

medical educational lines, as well as along the lines of research. The medical profession in America must be made to study general medicine more. Specialism must be earned, not adopted. The specialists of the past studied general medicine and was graduated as a general practitioner. In time he found his talent, his skill, and his propensity or inclinations all led him into one particular branch, not by premeditated selection, but by natural bent. It doesn't matter what a young doctor wants to be. If he is ever to be successful in any branch of the profession of medicine he must follow the trail of his talents, and no matter what he undertakes he will never be a successful doctor until he has laid the foundation by mastering chemistry, physics, and biology.

"Our medical colleges are not teaching enough chemistry and physiology. In this respect they are falling behind the older institutions of medical training. When I went to a medical college some forty-five years ago, we had four or five lectures a week on physiology, so that in five months we had as many lectures on this very important branch of the science as they give nowadays in two years. We were compelled to continue to study physiology and chemistry long after we had taken the regular course, sometimes going over a textbook two and three times. Life, from start to finish, from maturity to decay, is one long chain of chemical processes, and our research work must be speeded up until we get our American schools of medicine up to the very highest possible standards of efficiency.

#### Favors Medical Propaganda

"I note that Mr. Rockefeller's donation will be expended directly for education and research work, and not for propaganda. I don't know whether he classes as propaganda such work as eradicating hookworm, putting down pellagra, and so forth, which he has been accomplishing to such great benefit for the South, and to such great advantage to the medical profession everywhere, but I do know that it would be regrettable should he discontinue such activities. I don't know whether he intends to cease his endeavors before legislatures to bring about higher standards of proficiency in our medical schools, but I do know that this work ought not to be stopped until all institutions have a uniform standard of excellence.

"Indeed, I am of the opinion that our profession of medicine would gain more just at this time in the way of uplift by having Mr. Rockefeller's fund

directed toward education and laws requiring education as well as by spending it for practical research. We need more groundwork. Let us get back to teaching chemistry, and keep on teaching chemistry with physiology, and then teach chemistry with pathology, and keep on teaching chemistry to the last lesson in therapeutics, and we may hope to put our medical college on the proper basis and hold it up to its essential standards.

"Much research has been expended by these endowed institutions in seeking a cause for cancer as well as a remedy for this condition. Only within the last few years a woman of Boston left at her death nearly half a million dollars for a commission of American, British and French doctors to spend trying to find the origin of cancer and its cure. Those doctors studied cancer in every land and every clime, and the upshot of it all was that we stand today about where we have always stood—no positive medical or surgical remedy has been found.

"There is no cure for cancer in the realms of our present knowledge of medicine, because cancer, so far as we know, does not originate in a micro-organism. Cancer is not one of the 'self-limited' diseases, because it has its origin in an embryonic cell, or in a group of embryonic cells, caught in some tissue which, subsequently, because of irritation, or through some twist or defect in the nutrition of the area, becomes a fertile soil for the development of the growth of the cancer cell. Hence, we can see that research work in the investigation of cancer ought to be confined to those chemical processes involved in defective metabolism, and in the development of a nutritive pabulum which tends to excite super-activity in these embryonic cells. If research work could develop some method by which these embryonic cells could be discovered, and if a safe way could be devised for their complete removal, then the cure for cancer might be established, assuming that this is the true cause and method of development of the cancerous process."

#### Poor Medical Education

In his allusions to the way of American students in their primary lessons or primary courses, a hop-skip-and-jump with little regard for the mastery of chemistry, Dr. Porter strikes at what Dr. Abraham Flexner found to be one of the greatest evils in the American system of medical education. He was chief investigator for the Carnegie Institute, and is now general secretary of the General Education Board, founded

by Mr. Rockefeller, and will have in hand the task of distributing Mr. Rockefeller's late gift of \$10,000,000 to the board in such ways as the board members may prescribe. He wrote of medical colleges in America:

"Scandals in medical education exist in America alone . . . where acquaintance with disease is derived not from the study of the sick but from the study of textbooks."

In these and similar conclusions, Dr. Flexner was sustained by Dr. Henry S. Pritchett, who wrote an introduction for his report, saying that the American system of medical education was more or less a farce, and that American colleges were almost wholly without clinical facilities.

"If the lowest terms upon which a medical school can exist abroad were applied to America," wrote Dr. Pritchett, "three-fourths of our existing schools would be closed at once."

In this connection, however, it must be remembered that in nearly all the states great improvements have been made by legislative enactment since the activities of Dr. Flexner and Dr. Pritchett and others of these Carnegie and Rockefeller endowment funds began. The "Practice of Medicine Law" of New York State, enacted in 1916, as a result of the disclosures of these men, has gone a long way to improving the standards of the medical profession in this state.—The Phila.

#### FROM A LETTER TO DR. CHURCH

Author of "Sleeping Sickness and Other Mental Conditions"

March 15, 1920.

Dr. M. E. Church,

301 Grain Exchange Block,  
Calgary, Alberta, Canada.

My Dear Dr. Church:

I am writing to you partly because I have referred a case to you, a Mr. ——. He was played upon by the medical profession in Calgary last year and has not very much faith left for the medical fraternity. I told him to call on you, which I believe he will do occasionally during the summer.

The main reason for writing is due to the fact that I have just read your article in the February number of *Osteopathic Truth*, and I want to say a word of commendation, particularly for the frank and unreserved expressions contained in the latter part of the article where you declare yourself so strongly in favor of Osteopathy. Dr. Church, I suppose you have passed through pretty much the same experience as most all go through. It is too bad that one person cannot learn from another person's experience. I suppose we do learn in a measure, but we surely do not learn as much as we

ought to from the experience of others. You have taken your M.D. degree, you have investigated medicines, including serums, dope, etc. Now, you have come to the point where you even regret the time and thought force you spent in the pursuit of your M.D. degree, etc. You are to be congratulated. There is hope for you. You were temporarily deflected from the straight and narrow path, but you had sense enough to see that the osteopathic way was the right way and that the popular medical teachings of today are a deflection from the right way and tend to lead the investigator farther and farther away from the truth. I say you are to be congratulated because you have found yourself, but God pity those within our ranks who are still floundering about in the medical desert, unable to retrace their steps and find the straight and narrow way, which they forsook.

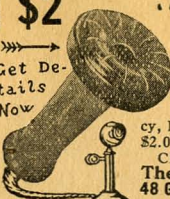
I can sympathize with you and appreciate the sentiments you express, inasmuch as I myself had an experience of a similar nature. Some of us, figuratively speaking, have to squander our inheritance and go to the point reached by the prodigal son, where he was obliged "to eat upon the husks that the swine did eat," before we really and truly find ourselves. When we reach this point the spirit of submission takes hold of us, self-righteousness and egotism vanish and we are ready then to say, "I will arise and go to my father" (Truth). We are ready then to recognize the error of our way and listen to the voice of Truth, which is unchangeable, yea, "the same, yes-

terday, today and forever." There is an old saying that the reformed drunkard makes the best temperance lecturer. It may be that the reformed medico-osteopath makes the best lecturer for A. T. Still Osteopathy. Anyway, the osteopath who has been unfortunate enough to be deflected from the straight and narrow path and at the same time has been fortunate enough to find himself again, knows how to appreciate the therapeutic pearl of great price, which is Osteopathy. I have seen many examples of the truthfulness of this.

I want to say a word in regard to the three cases you discussed in O. T. Those apparently are marked cases of autotoxemia. If you ever have cases similar to these to deal with you will find that the toxins are largely autogenous, being due to faulty elimination. In all those cases where you get dizziness and drowsiness, you will find the trouble hinges upon the liver. Have the person fast and put him through a course of wet cleansing, that is, irrigation along with osteopathic adjustment and you will get results in every case where results are possible and that without any of that high-brow lumbar puncture, etc. I have written an article for Osteopathic Truth and one for the Journal of Osteopathy in which I dwell on these points somewhat at length. I believe you will find them interesting and I would like to hear what you have to say in regard to them after you have read them.

With kindest regards and best wishes, I remain,

**\$2**  
 Get Details Now



**Saves Nerves and Time**  
**"THERAPHONE"**  
 Powerful Osteopathic Receiver Earpiece is Tuned to the Ear. It can't confuse nor fatigue. Absorbs Shocks, Exhilarates and Improves the hearing. For Privacy, Noises, Nervous, Deaf and Busy-\$2.00 Guaranteed to Suit Your Ear. Check or C. O. D. Export \$2.20  
**The Evolution Phone Co. Inc.**  
 48 Greenwich Ave., New York, City

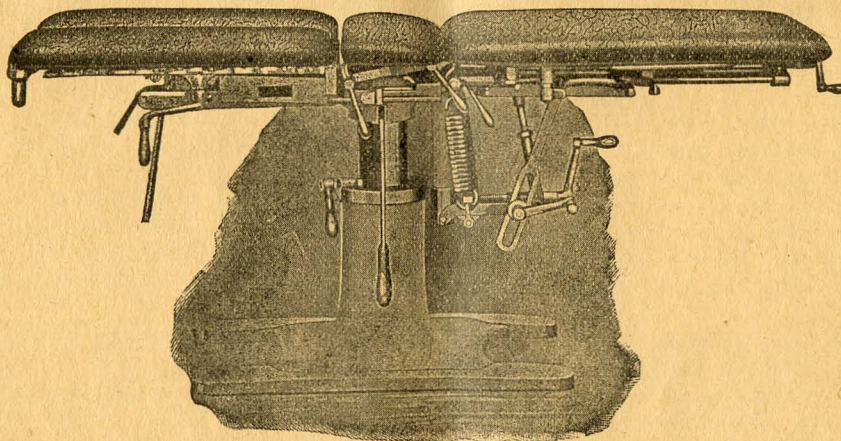
**ANNOUNCEMENT**  
**The Book**  
**"Therapeutics of Activity"**  
 by  
**A. A. Gour, M.G., D.O.**  
**Will Be Ready for Delivery**  
**By May 20th**

Those who ordered from us at the last A. O. A. Convention will be supplied at once at the price of \$3.00.

**The New Price Will Be**  
**\$3.50**

Send in your order now in order that you may study the Corrective Exercises given therein before coming to the convention to see Dr. Gour demonstrate them.

**OSTEOPATHIC TRUTH PUB. CO.**  
 1421 Morse Avenue  
**CHICAGO :: :: ILLINOIS**



**McManis Treatment Table De Luxe**

**DON'T** produce a lesion in your own back trying to remove one from a patient's back.

**PROTECT YOURSELF!**

Let a McMANIS TABLE do the heavy work!  
 With a McMANIS Table you can:

Eliminate **FIFTY PERCENT** of the hard work you are subjected to.

Obtain quicker and better results.

Treat the heavy weight patient as easily as you can the light weight.

AND patients like the treatments better!

**WRITE TODAY FOR OUR NEW CATALOGUE**

**McMANIS TABLE COMPANY**

**KIRKSVILLE,  
 MO., U. S. A.**



## SELLING THE OSTEOPATHIC SPECIALIST TO THE PUBLIC

S. L. Seothorn, D. O., Dallas, Tex.

From the standpoint of the osteopathic general practitioner; there are several salient and important facts to consider relative to the osteopathic specialists.

First. This is an age of progress and specialization; and in my opinion, the fact that the osteopathic profession contains especially trained and equipped men and women in the domain of surgery dietetics, eye, ear, nose and throat, research and laboratory work within in its ranks is doing more to raise osteopathy from the ruck of the various evanescent and charlatanical so-called schools of drugless healing than any one factor.

The fact that osteopathic graduates are educated and qualified to perform major surgery, eye, ear, nose and throat surgery, obstetrics, and capable of research and laboratory diagnosis, has been of inestimable value in raising our profession in public estimation.

Second. It should be the privilege as well as the duty of the osteopathic general practitioner to refer all cases requiring the services of a specialist to members of his own profession; for it is not only a courtesy and an incentive to the osteopathic specialist, but a distinct "Boost" for the profession and the osteopathic general practitioner.

The osteopathic general practitioner should insist, however, and most justly, for his personal reputation and that of the profession, that the osteopathic physician practicing a speciality be as competent and as well qualified in every particular as his medical colleagues.

Third. This should apply equally to all osteopathic specialists; eye, ear, nose and throat surgery, major surgery, obstetrics, dietetics, obstetrics, research laboratory, etc. Educate your patient to the fact that osteopathy is a complete and all embracing system of therapy and that the osteopath is a duly qualified and completely educated physician, and practices the osteopathic system of therapy by predilection rather than by reason of his limitations.

THEREFORE, It is my opinion that it is the duty of the general practitioner to refer his cases to the osteopathic specialist for obvious reasons.

First. Because he can do so with every confidence that the patient will

receive scientific and skillful treatment.

Second. That the patient will remain in an environment favorable to and in accord with osteopathic therapy; and if the results are successful will be a firmer advocate and well-wisher of osteopathy than before.

Third. The fact that the general practitioner has the assurance that he can obtain every service within the profession must, of itself, give him more confidence in, and a more exalted opinion of, the osteopathic profession.

**Therefore Boost the Osteopathic Specialist.**

**Boost the Osteopathic General Practitioner.**

## THE VENOMOUS CAN OPENER

By F. J. Feidler, D. O., Seattle, Wash.

Did you ever suspect the innocent looking can opener of being more deadly than a rattlesnake?

I believe that the jab of the can opener kills more human beings than die from the fangs of rattlers.

For some time past I have been watching how can openers are used.

The point is jabbed into the can of asparagus, meat, tomato soup, and what not; the cut around the edge of the can is made, and the opener is laid aside while attention is directed wholly to the contents of the can. The opener is neglected.

Later the now dried opener is noticed—is in the way—so it is tossed into its accustomed place in the drawer, there to remain until needed again. Not once in a dozen times is it even wiped, seldom is it washed, and it is never boiled.

After opening, canned food spoils much faster than fresh food. Canned foods, after being opened, are sometimes boiled, more times merely warmed; but most often they are eaten as they come out of the can—perhaps with addition of sugar—as in fruits—or lemon and vinegar—as in salmon, sardines, etc. Boiling is very seldom done, because it is known that the food has been cooked before it was canned. Warming is usually resorted to.

When boiled the food can be kept for two or three days, if boiled each day, without doing harm.

The cold eaten foods may be kept in glass or stoneware for perhaps twenty-four hours.

But the warmed over foods are always dangerous, because the moderate

heat is the very condition germs need to propagate with inconceivable rapidity.

Given a can opener whose tooth has from one to several coats of canned material on it, from one day to a week old; this coating is now a mass of bacteria teeming with several varieties.

In this foul condition it is jabbed into a can of perfectly good food, is carried all around the edges of the can, impregnating its venom into whatever it touches.

If the food is now boiled no noticeable harm may result. Boiled or not, if eaten immediately, if the infection is not too virulent, no noticeable harm may follow, as the intestinal antiseptic juices are able to cope with the small amount of toxins eaten. But when the food, cold or warm, is kept for some time, the ferment of the putrid coating of the opener blade, that has come in contact with the contents of the can, has had time to propagate and multiply enormously—in warmed foods much more rapidly than in the cold—and the alimentary tract now has a hard job on hand coping with the poison, resulting with any degree of distress from gastralgia to botulism and death.

The food has been destroyed by eating; its poisonous condition may never be discovered. Or if discovered the really innocent original contents are blamed, while the venomous opener lurks hidden in the drawer ready to spring out and poison the next healthy can of food.

Benzoate of soda, or other food preservatives, may actually be life savers at times by retarding the propagation of the germs after the can has been opened.

## CENTRAL STATES CONVENTION

Coates House, Kansas City, Mo.

May 18th, 19th and 20th, 1920

Extensive preparations are being made for the program and entertainment features of this convention.

Dr. J. Swart, President; Dr. Harriet Crawford, Secretary, and Dr. J. L. Lowe, Treasurer, of the Central States Osteopathic Association, ask the co-operation of the profession in making this a banner convention.

Requests for special features on the program, or information as to who is capable and willing to supply good numbers, should be sent to Dr. J. Swart.—Central States Osteopath.