

# **The Journal of Osteopathy**

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# The Journal of Osteopathy

Edited by W. K. Jacobs.

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*Editor Journal of Osteopathy, 1909-12*

# The Journal of Osteopathy

Edited by W. K. Jacobs.

VOL. XIX

FEBRUARY, 1912

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## Editorial

### **The Graduation Exercises**

Elsewhere in this number is an account of the graduation exercises of the "January 1912" Class of the A. S. O. This is the first mid-year class since the "skidoo" class of 1909, and the fact of its enrollment was necessary to relieve the yearly increasing numbers in the regular September classes. That the mid-year classes themselves have increased in numbers steadily since that date and that there has been but a very slight decrease in the numbers in the other classes speak well for the future of our science and the increasing favor that is being accorded to it by the public.—A. S. H.

### **Dr. W. K. Jacobs**

As our readers have possibly noticed elsewhere Dr. W. K. Jacobs is retiring from the position of Editor of the Journal of Osteopathy with this number. That he has filled this position with the greatest ability, it is needless for us to say, seeing that during the two years and one-half that he has been editor of the Journal, the tone of the magazine has been raised to a far higher plane than it ever had reached before. Seeing that the subscription list has substantially increased during his editorship, and from the expressions of commendation that are constantly being received at the office we feel assured of the fact that his efforts to raise the standard of the Journal have been appreciated by the profession as a whole, whose best interests he has kept constantly in mind. Having been closely associated with Dr. Jacobs throughout the entire period of his editorial work we have been many times impressed with his conscientious and painstaking efforts to place this magazine in its rightful position, as THE magazine of the profession, and we have realized the many difficulties that he has had to labor under. Dr. Jacobs is leaving

Kirksville to assume the general managership of the "National Sanitarium and Springs" at Freeport, Illinois, and we are confident that the brightest future awaits him and we feel assured that our readers unite with us in wishing for him the very best that the world affords.—A. S. H.

#### **The January Class**

As we write this, the enrollment for the new class has just reached the half-hundred mark, and the prospects look bright for an increase of some ten or fifteen to this number, before the registration will be stopped. As usual there are matriculants from all over the states, and Canada, and we understand that at least one member has crossed the briny ocean to enter in this class. We are glad to note that as the educational requirements for entrance are being raised, the tendency is marked for younger men to be taking up the study of osteopathy and that the number of college graduates who are making it their life-work is increasing. We extend to this new class our best wishes for a successful journey through the coming years.—A. S. H.

#### **Change of Editors**

This number of the Journal will be perhaps the last for which the present editor will be in any way responsible. It seems hardly possible that over two years have passed since he took charge of the Journal. It was certainly with "fear and trembling" that the work was undertaken—he was only a freshman. But speaking figuratively, he firmly resolved to "die game," when "die he must," but he also resolved to "live as long as possible." Result, he is not dead yet, and through the splendid loyalty and support of the profession, the Journal has prospered, and has made many new friends.

Through the intimate relation with the profession into which my work has naturally brought me, I have learned many valuable things, and the acquaintanceship with the many splendid men in the profession brought about through my connection with the Journal, has been a source of inspiration to me. The insight into the real problems which osteopathy and osteopaths are everywhere facing, I have sought to turn to good account editorially and otherwise, and shall continue to do so whenever opportunity may present itself. It is with a feeling of deep appreciation to the profession that I relinquish my duties to my successor. I started in with high ideals for the Journal, but nobody is more conscious than I that they have not been entirely attained. I sincerely hope that my successor will succeed better.

Arthur Smith Hollis, B. A. (Honors), Lond., D. O., of London, England, a classmate and personal friend of mine, assumes the editorship of the Journal and I have every confidence that the profession will be well served. He is a splendid student and is worthy of the confidence and support of the entire profession. Besides the Journal work, he will also occupy the chair of Applied Anatomy and Principles of Osteopathy at the A. S. O.

The editor has already assumed the general managership of the National Sanitarium and Springs of Freeport, Ill., where he will immediately locate, and he will personally guarantee that osteopaths will receive every advantage for their patients, should they elect to send them to this institution.—W. K. J.

#### **Compulsory Medical Inspection of Schools And a National Bureau of Health**

In an address delivered at Wenatchee, Washington, Dr. C. W. Littlefield, President of the League of Medical Freedom for the State of Washington, so many vital and pertinent points were discussed that we will present almost his entire address to our readers.

With emphatic statements, Dr. Littlefield denied the charges made by a local physician that the League of Medical Freedom is dominated by patent medicine interests and all the members are merely tools of these interests. Said he "I have the personal word of Mr. Harsch, secretary of the National League for Medical Freedom, that our organization has never received one cent of contributions from a pharmaceutical concern of any kind. This movement in no way represents or is identified with any patent medicine interests whatsoever."

#### **Opposed to School Inspection**

Probably the portion of Dr. Littlefield's address of most interest locally was his statement regarding medical inspection in the public schools. He admitted good points in favor of the innovation and pointed out its inadequacy. Conceding that all want to keep the children healthy and happy, that there are contagious diseases, that infection can be almost instantly communicated through the air when a child enters the school room, he still denied that the present system of inspection is effective to prevent the spread of such contagion.

To illustrate, he supposed that a child coming down with diphtheria is not discovered by the nurse until an hour or two has passed since entering the room. That has been sufficient for every pupil to be exposed to the germs. What good has the inspection done, he asks?

"The only way to make inspection effective," he said, "would be to put a nurse or examiner at each home before the child starts to school. Therefore, I am opposed to the present system solely because it is not practical. In the nature of the case it cannot be made practical."

### Inspection Causes Fear

His greatest objection was that compulsory inspection keeps the young and growing mind cowed by fear, the greatest demon on earth.

"Can a child expecting to be examined by a nurse keep his mind on his books?" was asked. "Just as certain as this practice goes on you will notice a marked decrease in advancement of scholars as a whole."

The speaker then told of having delivered this lecture in Spokane recently. The superintendent of the Spokane schools was seated in a box to the left of the stage. He voted for the resolutions passed that afternoon although they denounced compulsory medical inspection in the schools. He explained afterwards that he had always favored inspection until hearing Dr. Littlefield's demonstration of the impracticability of the system.

The lecturer acknowledged that a nurse in the schools can be very useful in looking after the simple needs of pupils and counseling with teachers on matters of sanitation; but he declared that she is not a diagnostician and should not attempt to tell the scholars when they have diseases or what those diseases are. The rest of his lecture follows:

"Should the American Medical Association succeed in getting a law passed by congress giving to the Allopathic School of Medicine a monopoly in this country upon the healing art, they will lose far more than they can possibly gain. Should such a law be enacted, forty days and forty nights will not have passed until they will be crying out, 'Men and brethren, what shall we do? We have bartered the confidence of the people for gold, and we have lost!'

"It is asserted by the friends of this proposed legislation that such a thing as a monopoly of medical practice is not intended. We have only to review the trend of medical legislation for the last twenty years to be convinced that "monopoly of medicine" has been the watchword of the allopathic school for nearly a quarter of a century, and that all medical laws enacted during this period have for their single purpose the legalizing of the allopathic school of practice. I shall show you that this is true beyond a possibility of a doubt.

### Would Mean Professional Stagnation

"Nothing could happen that would produce such professional stagnation as a monopoly by any school of the healing art entrenched by law.

"If you would raise a child to be sickly and puny, put it in a room with a nurse and feed it with a spoon. Just so with any physician. Make it unnecessary for him to study and exert himself in order to build a practice in a community upon his own merits and initiative, and I will show you a man who, after he has been in practice for forty years, knows less than when he left his alma mater—for the simple reason there has been no incentive for effort.

### A. M. A. in League with Serum Manufacturers

"I want to assert here that, if not in fact, then as a matter of practice, the proposition has been made to the American Medical Association by the manufacturers of vaccines and serums, that if their school would use these products, they would not only go to the expense of advertising, but would assist in influencing legislation.

"If ever a criminal has been justly found guilty upon circumstantial evidence, the facts in this case make it almost certain that such a proposition has been made to the American Medical Association. Not only have the manufacturers advertised these products broadcast, established institutions for their experimental use, and furnished them to the allopathic profession free, but the allopathic profession as a whole now use them.

"Do you tell me now that an entire school numbering several hundred thousand physicians, scattered throughout not only the United States, but foreign countries as well, would unanimously and concertedly take up a system and practice to the exclusion of all their former methods had there not been some good reason for it?

"When I say that there is danger of stagnation in medical monopoly I mean that any bill that may be enacted creating such a monopoly will contain within itself the provision, either stated or implied, that these products shall be used.

"In proof of this I quote from House Bill No. 439 (Feb. 20, 1911) introduced into our own state legislature last winter:

"Section 1. That in accordance with Section 216, of the constitution of the State of Washington, the State Board of Health is hereby invested with the following powers in addition to those which have heretofore or may be hereafter conferred upon said Board \*\*\* To have supreme authority over all matters relating to the prevention, control and suppression of disease dangerous to the public health.



“To designate by rules, regulations and orders the measures necessary or advisable to prevent, control and suppress diseases dangerous to the public health.

“To prepare free and distribute free to the residents of this state anti-toxin, vaccines and other biological products for the cure, prevention and control of disease and to make rules governing such distribution.’

“I also quote from a little bulletin published by the Seattle Health Department—‘This department is extremely anxious that every one shall know that the basis of the opinions expressed are founded upon actual reports of several millions of cases. Do not employ a physician who does not administer anti-toxin. There are only a very few in this city who are so ignorant of the treatment of diphtheria as to decry the use of this remedy. If your physician has any doubt as to the efficiency of its administration, do not wait eight or twelve hours or until the next day, but insist upon calling in such consultation as will lead you to determine positively what is best to be done.’

“It would be interesting to know just what interest the various vaccine farms have in such proposed legislation. Does the audience believe the managers of such farms are wholly ignorant of this effect to compel the people by law to purchase their products?

#### Bureau to be Governed by Pull

“Another danger to the profession in such medical monopoly lies in the fact that only those with a political pull, regardless of ability, will be chosen to fill places of governmental trust and emolument.

“If the chief of this National Health Bureau should be honest, and we grant that he will be, no one who does not practice his method will be appointed. If he is dishonest, and does not have any fixed convictions as to methods of treatment, then we certainly do not want him.

“Judging the future by the past, we are assured that only allopathic physicians will be appointed by the National Health Bureau. In proof of this I here present you with a list of physicians now employed by the government:

#### Medical Practitioners in the Government Departments Employed as Such

War Department—Officers of the regular medical corps ranking from first lieutenant to brigadier general .....	299
Medical reserve corps ranking as first lieutenants .....	225
Contract Surgeons .....	13
Total .....	537

“There is in addition an inactive list of 99 and a distinguished list of 140 called upon for special service upon occasion and paid for that service.

Navy Department—The legal strength of the medical corps of the Navy department which is kept practically full is . . . . . 345  
Acting assistants . . . . . 25

Total . . . . . 370

“Of these 15 rank as rear admirals, 16 as commanders, 86 as lieutenant commanders, and the balance as lieutenants and lieutenants (junior grade).

State department—None.

Treasury department—Marine service—

Surgeon-general .....	1
Surgeons .....	33
Passed assistant surgeons .....	74
Assistant surgeons .....	21
Acting surgeons .....	258
Quarantine service .....	12
Temporary men .....	25

Total men . . . . . 424

Department of Justice:—

One each at federal prisons and district jail .....	4
Estimate retained at points where federal prisoners are held .....	100

Total .....

Fees are paid to physicians at practically every county jail in the whole country.

Department of the Interior:—Pension examiners .....

Indian office .....	149
Government asylum for the insane .....	21
Freedman's hospital .....	11

Total .....

Total in the service of all departments .....

“The Department of Agriculture employs about 250 chemists, 984 veterinary inspectors, 1026 live stock inspectors, and others whose work verges on medical practice.

“To enter the service of any of these departments the applicant must stand the test of the regular school. There is no provision against other schools, but the regular school test is applied. All government practice is in accordance with that school and appointees would be al-

lowed no other practice. There is no record of a man in the government service who is not of the regular school.

#### **Vaccination not Scientific**

"As to the merits of serum treatments, since they have become the subject of legislation, I may say that they are not founded upon any demonstrated therapeutic law in nature. It is a serious question if we admit the germ theory of the propagation of disease, whether or not germs may be used to cure disease. It seems to me that one or the other of these propositions is wrong, since they are diametrically opposed to each other. We may admit with perfect safety that, if you prepare the soil and plant the seed, you will get a crop, whether it be of germs or of some grain—but that you would change the crop by sowing more seed of the same kind, is a proposition hard to demonstrate.

#### **Abandoned in England**

"England, after having tried vaccination under a compulsory law for 119 years abandoned it, and made it a crime to practice it as compulsory. No statistics have since been furnished to show that England is not right. We are not yet prepared to accept vaccines or serums of any kind as scientific treatment for any particular disease. Therefore, to confine the medical profession to their use at this time, and prevent other methods from being tried, means not only returning to the Dark Ages, but the blotting out of all possibilities of future progress in medicine.

#### **Destroys Inalienable Rights**

"The danger of a medical monopoly to the public is no less than to the profession. Indeed I can scarcely see how it is possible to compel anybody by law, under our constitution, to accept any method of treatment. We are assured liberty in the pursuit of happiness of life. Medical treatment holds such intimate relation to life that any law which would deny the individual the right to his desired mode of treatment, would rob him of the rights of life. The right of the people to consult the school of their choice is an inalienable right, and ought not to be taken away by law."

"It is inalienable, for the reason that it is directly connected with our happiness. If your wife or child, father or mother or husband were sick and you were compelled under law to have a physician in whose methods you had no faith, and that loved one was to die, there is no sorrow so keen as would be yours at such a calamity.

#### **How Monopoly Worked in Germany**

"Let me give you a little medical history. A little longer than a hundred years ago, there lived in the city of Leipsic, Germany, a physician by the name of Samuel Hahnemann. This doctor believed he had discovered a scientific law in medicine. His success became so alarming to the allopathic school that they set about to find means of hindrance to his practice. To do this they had a law passed that no physician should prescribe his own medicine. As a result it became very convenient for the pharmacist to whom all prescriptions must be referred—to "just be out" of that particular remedy when a prescription came from Dr. Hahnemann.

"Now, it is just possible that this law did not mention Homeopathy or Dr. Hahnemann or any other school. Nevertheless it had its desired effect of driving Hahnemann and his disciples from Germany.

"Some time after, an epidemic of cholera, for which the allopath had no remedy, nearly destroyed Leipsic and Hahnemann, then living in Paris, studied the disease from reports of the symptoms, and wrote that arsenic and copper would cure. They used the remedies and stayed the pestilence.

"Let us substitute Wenatchee for Leipsic. Let us have governmental control of medicine here—let that medicine be only allopathic—let some epidemic arise which cannot be controlled (this is not uncommon in the world's history) yet your citizens die by scores, what are you going to do about it?

"You say such a thing is impossible. I say it is not only possible but highly probable under the proposed methods. The worst epidemic of smallpox ever known was in Leicester, England. Then every one was compelled to be vaccinated.

"Don't imagine for a moment that seeds of disease can be sown in the blood of your children and they not reap the crop, sooner or later. As long as the words of the Nazarene hold true—"Whatsoever a man soweth that shall he also reap" you cannot escape the legitimate results of this pernicious practice. You cannot ignore the almighty fiat "each shall produce after its kind."

#### **Claims are Inconsistent**

"Dr. J. N. Hurty, secretary of the State Board of Health of Indiana has seen fit to compare a mother stricken with consumption with a child in her arms—but for which the state does not now furnish treatment—with a hog in the pen threatened with cholera for which the

state does furnish treatment. He asserts that if congress will enact a law establishing a National Board of Health, that this mother can as easily be protected against consumption as the hog against cholera. Now I want to ask in all candor, is Dr. Hurty in possession of the knowledge that will protect that young mother with the child in her arms, against the ravages of this white plague and yet refuses to give that knowledge to the public unless he is entrenched in law and protected by an act of our National legislature? If he does not know, what does he mean by asserting that such a thing is possible? Is he stooping to the methods of the street fakir, the charlatan or the quack in attempting to make us believe that he can do something that he cannot? Or does he expect upon enactment of such a law, a special revelation which will enable him to do this thing?

#### Conundrum for Dr. McCormick

"Dr. J. N. McCormick, secretary of the Kentucky State Board of Health, tells us that there are more than three hundred thousand deaths annually in this country that he could prevent if he had a National Board of Health behind him. Does Dr. McCormick mean to tell you and me that he is in possession of means and methods that may be employed and which he will not reveal to his medical associates until he has been enthroned as secretary of the National Board of Health?

"If he is not in possession of such knowledge, why is he making such promises or assertions from the public rostrum throughout this entire country? He knows full well that he is not in possession of any such information, and so do you. It is simply a trick of the political monte-bank to pull the wool over the eyes of the people to persuade them to entrench him in law.

#### Comparing Mothers and Hogs

"This matter of comparing our young mothers with babes in their arms with hogs in the pen is the basis of the whole business. The value of the hog is based upon dollars and cents, so is this proposed medical legislation. The principal actor in this pernicious movement affirms openly that once such a law is in force, millions of dollars will be at command to be expended in their experimental efforts.

"Thus another danger to the public in medical monopoly is the immense expense which will be attached to it without any adequate return. During the last 20 years the people have delegated to the medical profession by law every single right they are supposed to have—but ONE.

#### Have Monopoly Now

"If you will tell me anything you would like to do, I will show you a LAW by which a physician can prevent your doing it? Would you marry? Then you must ask a physician. Would you go abroad? Then you must pass quarantine and be vaccinated. Would you make a campaign for office? Then your opponent can have you quarantined at the mere "say so" of a physician and you are locked up. If your competitor would be rid of you a complaint to the health authorities will close your place of business or detain you at home—send you to jail. The doctor's word is law. What right have you? Just one. You may now choose the doctor you wish to have this supreme authority over you. This the National Board of Health will take away.

#### Public Needs a Guardian

"In proof of this I quote from Dr. Samuel G. Dixon, of Harrisburg, Pa., as published in the American Medical Journal of June 8, 1907:

"Compulsion, not persuasion, is the keynote of state medicine. Let it be understood that no matter how great efforts we may make to educate the people, unless we have the written law to fall back on, state medicine, while it may be a beautiful science, can never be a practical art\*\*\*\*The great majority of mankind are neither wise enough voluntarily to submit themselves to the requirements of sanitary law for the sake of preserving their own health and that of their loved ones, or righteous enough to be willing to exercise self-denial and repress the cravings of avarice to save others from sickness, suffering and death. \*\*\*\*But the law we must have. These laws must reach into all the relations of life. As their basis they must start with the prompt and accurate registration of births, deaths and marriages, and of the presence of transmissible and communicable diseases, and they must embrace the control of epidemics by domiciliary quarantines; the supervision of the transportation of the quick and the dead and the burial of the dead; the construction, heating and ventilation of our homes and public buildings; the protection of water supplies and the restoration and industries of the people; the protection of food stuffs, including milk and other beverages, and of drugs, from adulteration and impurity; the education of physicians, dentists and veterinarians and barring our doors against the introduction of communicable diseases and pestilence from foreign countries."

"Control of everything is what they want. This is the single purpose of the present agitation for a National Board of Health."

### Resolutions Presented

At the close of the lecture Dr. Ditman of Wenatchee presented a set of resolutions on behalf of the local Medical Freedom Club. The attempt to establish a national health bureau was condemned as a trick of political doctors by which to divert millions of government money chiefly for their own benefit. Compulsory school inspection was branded. The right to select the practitioner of individual choice was declared to be an inalienable right. The rising vote was almost unanimous.

This presentation of facts is not only the clearest we have seen but it gives a comprehensive view of the whole situation which exposes this damnable piece of legislative villiany in all its naked ugliness. A realization of the far reaching possibilities of such a bureau in the way of further entrenching a wicked monopoly, should inspire our readers with an unalterable conviction against the whole infernal proposition. Nor is it at all clear to us how the appointment of a "Sanitary Engineer" at the head of the Bureau instead of a physician, could prevent the institution of this regime of state medicine. Might not the sanitary engineer have an allopathic preference either "natural or acquired?" While the proposed law might not give preference to any school of healing any more than the law does now with regard to government appointees, what would prevent the same conditions from existing then as they do now? Indeed it is our opinion, that osteopathic societies should go slow in passing resolutions favoring a National Bureau of Health, whether a sanitary engineer be at the head of it or an allopathic physician. It is inconceivable that a power which is bullyragging state legislatures and which is now attempting to do the same thing with the national congress, should find an insurmountable obstacle in the shape of a sanitary engineer to keep it from accomplishing its purpose.—W. K. J.

## Anatomical Lesions Associated with Splanchnic Disturbances

BY DR. H. W. FORBES.

I will speak on the mechanism and means of natural recovery. Dr. Tasker has shown that the body tends to do at each moment what it should do in order to continue living. We see many examples of changes from the average or the normal in the size or position of various viscera, which deviate from the normal where it is made necessary because of altered internal or external conditions. Such deviations are made necessary in order that the body may continue living.

Hypertrophy or growth is one of the most efficient methods of recovery. Lesions arise which are irreparable, destructive lesions. Under such circumstances the body must die or react and one of the reactions which makes life possible in spite of deficiencies is hypertrophy.

The extract of the supra-renal capsule was administered to a rabbit. This increased the general blood pressure. Under the influence of the heightened blood pressure the animal would die unless an adaptation in the way of hypertrophy of the heart took place to furnish the increased amount of energy necessary to continue the movement of the blood mass. The heart increased to double its size in consequence of which the animal remained alive.

In a condition of general arterio-sclerosis the kidney has been reduced to less than half its size, by interstitial nephritis. That means a reduction similar to what would occur if one kidney were removed. A condition has been established which would invariably terminate in the death of the individual but for a certain compensatory mechanism. In the normal individual there would be three pints of urine daily and a blood pressure of 110 to 150. If the contraction of the kidney were established without any other change in the body, the individual would die because of the accumulation of the poisons. But the heart increases so that in many cases of interstitial nephritis, the heart reaches double its mass. If the blood pressure remained the average blood pressure and the kidney were reduced in size, the decrease in elimination or urine would cause the death of the individual from the accumulating poisons. But by a wonderful cardio-vascular reaction the heart increases in mass,

its capacity to do work increases, the blood pressure is increased and the amount of urine eliminated increases as the blood pressure increases, so the individual is kept alive. If there were no cardio-vascular reaction, the individual would die.

This reaction does not occur unless there is an uninterrupted circulation of blood and nervous energy from each part of the body to every other part and back. It is absolutely necessary, in order that existence should continue in spite of the lesion, that there should be perfect co-ordination between every part and every other part.

In a case of Bright's disease with interstitial nephritis we cannot restore the contracted kidney, which has much scar tissue in it. We can, however, establish a compensation so that the man may live in fair health. Our object is to establish an hypertrophy of the heart to bring the blood pressure above the normal blood pressure. In order to do this, we must remove from the outside and the inside of the body all those influences which would tend to prevent this natural reaction. Then the body adapts itself to the condition and continues to live.

The walls of a bladder may become thicker than the left ventricle, this change being made necessary by obstruction in the urethra and being a compensatory hypertrophy.

Many times the object of treatment is not to restore the organ to a certain condition. In the presence of certain tissue we recognize that the defect is irreparable, but such defects can be compensated by hypertrophy and good health maintained for years.

In a mitral valve injured by ulceration, a scar has formed. The tissues reproduced in healing is less than what has been destroyed and the valve leaks. We recognize the symptoms of a mitral regurgitation. The valve is defective in consequence of which the left ventricle is unable to do its usual amount of work and the blood regurgitates through into the auricle. All the organs behind the heart change in size; the left ventricle dilates, the left auricle dilates and the pulmonary vessels and capillaries dilate. Then the right auricle dilates, the vena cava and the vessels of the stomach and intestine all dilate. The wave of increased pressure reaches the capillaries and all the tissues spaces dilate and we call it dropsy. But suppose all these vessels and heart walls were rigid. The moment the defect appeared in the right valve, there would be rupture of the heart. In consequence of the elasticity of the structures behind the heart, they may dilate and the man continue to live. In a few days the left ventricle will grow; hypertrophy will be established provided all the conditions for hypertrophy obtain, and the heart will do its extra work. The hypertrophy will remove the symptoms.

In the typical barrel chest of emphysema, we ask is the condition of this chest the cause of the emphysema, or is the condition of the lungs the cause of the condition of the chest? The air vacuoles are broken in the lung and there is great destruction of tissue. In many cases of emphysema, more than half of all the alveoli of the lung have become functionless. Unless the capacity of the chest were increased, the man would suffocate, and in adaptation to the progressive loss of lung tissue, the chest reaches the barrel chest, in conformity to the general rule of physics that the capacity of any space will be increased as it approaches the spherical. Our procedure in this case is to promote the compensation, to increase the facility, to assist nature to establish and maintain a barrel chest in the individual. We promote freedom of movement of the ribs and all of the spinal joints until, in spite of the fact that the man has only one-half of the normal lung tissue, he may live without symptoms. It is folly to try to force the chest back to normal; it is wise to attempt to promote the establishment of compensation.

In a case of consolidation of the lung, the sides of the chest contract. Wherever the lung is consolidated, the size of the side is reduced. In a great many cases this reduction is of actual benefit to the patient. It is due to atmospheric pressure, which reduces the chest when the lung cannot expand, the other side undergoing a compensatory hypertrophy. If there be such a consolidation, it is folly to attempt to overcome the contraction. In many cases of acute inflammatory lesions, we copy nature and increase the contraction by adhesive bands to immobilize it.

In a case of atrophic cirrhosis of the liver, it may be reduced to one-third its former size by the destruction of liver tissue and great increase of scar tissue. Scar tissue forms around the portal vein obstructing it and obliterating two thirds of the portal capillaries. Without compensation there is intestinal catarrh and general symptoms of toxemia due to congestion of the portal system by blood which cannot find its way back to the heart. But the skin over the abdomen is full of small veins connecting the superior vena cava with the inferior vena cava across the thorax and abdomen. The round ligament extends from the liver to the umbilicus and a few small veins also persist here. In the obliteration of the portal capillaries all these veins began to carry more blood along with veins from the capsule of the liver to the diaphragm, veins in the lumbar region, etc. In the effort to adapt to the destruction of the vessels in the liver, all the collateral routes become opened up and the individual continues to live. We cannot cure cirrhosis of the liver by changing connective tissues back into hepatic tissue. The damage is irreparable. In many cases we can establish compensation and facil-

itate the opening up of all the by ways for the circulation back to the heart.

In lesions where increased capacity is necessary to maintain life, if there is a normal circulation, normal nerve distribution and time given, the body will do what it should do in order to remain alive; and by studying nature's method, we make our treatment rational and scientific.—By special Journal Reporter at the San Francisco Convention.

## Appendicitis

### In one breath

Seeds of apples. Irritation.  
 Bad bacilli. Inflammation.  
 Castor oil in double doses.  
 Pain on right side. Diagnosis.  
 Ambulance. Scrub. Anesthetic.  
 Mental blank. Effect emetic.  
 Blue-clad nurses. Change of dressing.  
 Liquid diet. Convalescing.  
 Visitors at certain hours.  
 Sympathy, books, figs, and flowers.  
 Everything then lovely till  
 One receives the Doctor's Bill.

## Graduation Exercises at A. S. O.

On January 21st the Baccalaureate Sermon of the class of January, 1912 was preached at the Christian Church by the Rev. B. F. Jones, D. D. The sermon is reprinted in full below and the program carried out was as follows:—Hymn. Invocation—Rev. E. E. Loose. "Earth and Heaven,"—Mercadante: Miss Lulu Hamilton, Miss Coral G. Sykes, Mr. L. Farrar Reynolds, Mr. Benjamin C. Jones. Scripture Reading. "Consider and Hear Me,"—Wooler; Mr. Charles H. Croxton. Baccalaureate Sermon—Rev. B. F. Jones. "The Heavens are Telling," Haydn, Choir 1st M. E. Church. Benediction—Rev. Jones.

## Bacclaureate Sermon

REV. BEN F. JONES, D. D.

### "THE LAWS OF ACHIEVEMENT."

"I returned, and saw under the sun, that the race is not to the swift, nor the battle to the strong, neither yet bread to the wise, nor yet riches to men of understanding, not yet favor to men of skill; but time and chance happeneth to them all."—Ecl. 9:11.

There never was a time in the history of humanity when the competitive struggle for place and position was so great as it is today. Look where you may, you will find every avenue of business and professional life crowded with competitors, each struggling for leadership. So great is this battle for supremacy, and so strong are the odds against winning out, that Bulwer Lytton was right when he described the situation by saying,—"Leave your place in the world for only ten minutes of time and when you come back, someone has taken it."

We have heard sweet girl graduates declare with sophomorean eloquence that—"There is always room at the top;" but we are compelled to admit how comparatively few ever reach that exalted eminence. The most casual observer can readily see that there is a great difference in the way men get on in business and professional life. Some start out with everything favoring them, brains and money and family connection, to fail ignominiously, while others start out loaded to the guards with disadvantage, battle nearly all their lives against adverse conditions but in the end succeed gloriously. There are those who will

tell you that it is all blind luck; the one man was born under a lucky star, while the fickle goddess of fortune has been unmindful of the equally earnest efforts of the other man. But the more we study the real inwardness of human events, the more ready will we be to agree with Shakespeare when he makes Cassius to say to Brutus,—“The fault dear Brutus, is not in our stars, but in ourselves that we are underlings.” Or with Longfellow, when he declares, that it is,—“Not in the clamor of the crowded street, nor in the shouts and plaudits of the throng, but in ourselves is victory or defeat.”

This old Book, which contains the wisdom of our humanity through the ages has declared that “Time and chance happeneth unto every man.” For we are not of chance, nor the mere creatures of circumstance, but are god-like in our origin, aspiration and opportunity. Down in Atchison, Kansas, lives a man whom I wish to introduce to you today. His name is William Marion Boler, and he was born about forty years ago. He never knew what it was to have a strong manly father with whom to counsel and advise, and his mother, a widow, was compelled to bring him up under circumstances of deepest poverty. When he was six years of age he was stricken with spinal meningitis, and its ravages left him both deaf and dumb. When he was eleven years of age, this little deaf boy, playing on the railroad was run over by a train and lost both of his legs. The widowed mother entered a claim against the Railroad Company, and they paid her seven hundred dollars; but all of the money Willie ever got was three hundred dollars with which he bought a few acres of ground to make a home for his mother and himself. He was not sent to school until he was sixteen years of age, when, becoming a ward of the State, he was sent to the school for deaf mutes at Olathe, Kansas, where he remained four years; becoming fairly well educated in the common branches, and very proficient in giving the expression to his fingers which had been denied to his tongue. There was a young girl attending this school who, like himself, was deaf and dumb, and through her, Willie became acquainted with her mother, a widow with four children. Some ten years ago Willie married that widow and her family, and it was the wisest step he ever took; for with his marriage came sympathy, a home, and someone to take a tender and sympathetic interest in him, and give to him intelligent attention. Now when a man marries a widow and four children, it is up to him to do something to support his considerable, not to say happy, family.

In casting around for a means of livelihood, Willie found it in laying paving bricks; having no legs to get in his way, nor being compelled

to stoop as other men do he soon became so rapid and proficient that he began to attract attention. The story of his ability spread abroad, and a couple of years ago, at Lexington, Missouri, he met the champion paving brick layer of the world and entered an all day contest with him. All day he worked, and when the day was finished, he had laid 35,000 bricks, had defeated the champion and was himself the world's champion paving brick layer. Since he married he has built and paid for a nice little cottage home in the outskirts of the city of Atchison, has planted his ground with shrubbery, fruit and flowers, keeps chickens, a cow and a horse and has transformed his home to a bower of beauty. He is now a step-grand-father, allows one of his step-sons-in-law to live with him, belongs to the don't worry club, is a great joker, and goes smiling his way through the world which frowned so darkly upon him in the beginning. If there are any signs in the deaf-mute language which express envy, malice, anger, or discontent, Willie has never learned them. My friends; let us cease to prate about luck, either good or bad and learn once and for all, that achievement is no accident, but is in proportion to earnest, persistent and determined effort.

Personally, I think Henley is right, in his little poem,—

“Out of the night that covers me,  
Black as the pit from pole to pole,  
I thank whatever God's way be  
For my unconquerable soul.  
In the strong stress of circumstance  
I have not winced nor cried aloud;  
Under the bludgeonings of chance  
My head is bloody, but unbowed.  
It matters not how straight the gate  
How charged with punishment the scroll;  
I am the master of my fate—  
I am the captain of my soul!”

The author of the Ecclesiastes, one of the world's greatest moral philosophers, near the end of a long and most eventful life, left as his legacy to unborn generations this significant statement,—“The race is not to the swift, nor the battle to the strong, nor yet riches to men of understanding, but time and chance happeneth unto them all.” In these tremendously significant words, we find formulated “The Laws of Achievement.”

“Time and chance happeneth unto every man.” The late Senator John James Ingalls of Kansas, once wrote a little poem which has been widely read and quoted. It is entitled “Opportunity” and runs as follows:

"Master of human destinies am I;  
 Fame, love and fortune on my footsteps wait,  
 Cities and fields I walk; I penetrate  
 Deserts and seas remote, and passing by  
 Hovel and mart and palace, soon or late  
 I knock unbidden once at every gate;  
 If sleeping wake; if feasting rise before  
 I turn away. It is the hour of fate  
 And they who follow me reach every state  
 Mortals desire, and conquer every foe  
 Save death; but those who doubt or hesitate,  
 Condemned to failure, penury, and woe,  
 Seek me in vain and uselessly implore;  
 I answer not and I return no more."

This is a most beautiful piece of versification; but more than this, it is not. It is paganism, pure and simple, and is as false as it is unchristian.

Christian doctrine protests against and common observation disproves the idea that opportunity knocks but once and comes no more.

I am afraid that it would fare ill with the most of us if opportunity came but once to us, for we do almost nothing perfectly at the first opportunity. No single opportunity may come again, but others come; and they may be more divinely beautiful than any that have gone before. In Florence, Italy, among the rare treasures of art, is Michael Angelo's "David," made 350 years ago. When it was unveiled, it caused an unparalleled sensation among all true lovers of art, and it is even today, perhaps one of the most beautiful pieces of statuary in the whole world. The remarkable thing about it, is that it was the stone's second chance. A sculptor began work upon a noble piece of marble, but lacking skill, he only marred and spoiled the block and it was thrown away and abandoned for years. The great Angelo, passing that way saw the stone and perceived its possibilities. Under his skillful and masterly hand, the rejected and apparently ruined piece of marble was chisled into the fair and marvellous beauty which appears in the statue of David. Our life at the most is brief, but life is opportunity and there is no place for the man who sits down and declares that he has no chance.

#### 1. "The Race is not to the Swift."

When we hear this statement, we think inevitably of Aesop's fable of the tortoise and the hare. We recall how the swift-footed hare ran

swiftly for awhile, but confident of her own superior powers, sat down to rest and sleep before the goal was reached; while the slow-footed tortoise, knowing well her limitations, plodded on and on, without rest or sleep until the race was won. The old fable teaches us that the conscientious plodder is the one who wins in the long run. It is often a matter of wonder, what becomes of all the honor men and women, the class valedictorians turned out by our colleges, universities and technical schools. They frequently fall behind and are left in the race of life, and all too often are never heard from after the day they leave their alma mater; while perhaps the man who stood lowest in his grades, later comes to fill the public eye with his achievements. The honor man has fallen behind in the race because he has depended upon his genius to carry him through, while with no other hope than that of hard, persistent effort, his less brilliant fellow has succeeded. The best illustration of this fact that I know of is the case of that great American soldier and citizen, Ulysses S. Grant. No one thought when he was a boy that he would ever amount to much. He was slow in his studies, and spent much time reading the life of Napoleon, until in exasperation the teacher took the book away from him and put it into the stove. As a boy he was distinguished for nothing save fearlessness, slowness of comprehension, and an invincible will-power. At West Point he occupied only a medium position in his class and gave but little promise of eminence or future distinction. He failed as a farmer, was a fourth-rate merchant, and in middle life was still patiently plodding on, when he was summoned by his country. But when that call came every power in his nature was brought into play, and he went quietly to his work, doing that which first came to hand, without complaint of any lack of appreciation on the part of the public. He arose from one position to another, until he became Commander-in-Chief and held the destiny of the nation in his hand. This man, who graduated from West Point, twenty-first in a class of thirty-nine, kept everlasting at it, finally superceding the brilliant George B. McClellin, and conquering Robert E. Lee, each of whom had stood second in his class. He plodded on until he brought the war to a successful close, and was chosen President of the United States. General Grant was nothing more than a man of good common sense, with a level head and a persistent purpose and will. He never tried to do anything which he did not know how to do, and when he began a thing, he stuck to it until he won, "if it took all summer."



"Keep plodding, 'tis better than sitting aside.  
 And dreaming and sighing and waiting the tide;  
 In life's earnest battle, those only can win  
 Who daily march forward and never give in.  
 In life's early morning, in manhood's fair pride,  
 Let this be the motto your footsteps to guide;  
 In storm or in sunshine, whate'er you begin,  
 Be earnest, straight-forward, and never give in."

## 2. "The Battle is not to the Strong"

This, I may add, is a reversal of the popular judgment. It was Napoleon who said—"God is on the side of the strongest battalion." The whole military career of the man was founded upon that idea. For two thousand years, the Christian church has been trying to root out of the minds of men the world-old idea that "might makes right," and yet there is much to be done before that is accomplished. Jesus Christ teaches that the great man is not he who is endowed with the pride of birth, social distinctions, or the power of great wealth, but service. "He that will be great among you, let him be the servant of all." In all the wide realm of human opportunity, there is no greater sphere of activity, in which a man may serve than in the calling you have chosen; if second anywhere, second only to the Christian ministry. Old Mordecai, saying to the beautiful Queen Esther,—“Perhaps thou art come to the kingdom for such a time as this,” may have a message for you today

Certainly never, since the beginning of time has such tremendous problems confronted humanity, as those to be solved by the English speaking peoples in the next twenty years. You are coming to your kingdom just in time to meet those problems and help in their solution. I wish you joy of the choice of your life-ministry and profession; and I trust that you shall never lose sight of your citizenship. May you see clearly from the beginning that might can never make right and that in the long run, the battle is not to the merely strong of earth. When I was a boy, hoeing corn in the field one day, my attention was called to a pair of bee-martins, which had built their nest in a large tree which stood in the center of the field. That day, a vulture came sailing overhead and in his flight approached the tree where the bee-martins were nesting. Daddy bee-martin, on the watch, considered that the interests of his fledglings were menaced, and there was a battle-royal between the tiny bee-martin and the vulture. The air was filled with noise, confusion, feathers, and putrescent odors; but victory, com-

plete and absolute, came to the little fellow who was fighting for his home. Talk about an eagle being our national bird; thirty years ago, I decided to wear a bee-martin on my coat of arms. An elephant was one day rummaging in a grain-bin, in an endeavor to find a few stray morsels of grain. A mouse engaged in the same effort, ran up the elephants trunk. You will all concede, of course that a mouse in your trunk is in the wrong pew. And the elephant, probably a female, thought so too, for it took all the attendants in that menagerie to run down that elephant. In the battle of life you will find that it is never mere avoirdupois that counts, but brain instead of brawn, and right instead of might, which in the long run wins out. No! big things are not necessarily successful things. Xerxes, the Persian, invades Greece with two million men and four thousand ships of war, the representative of forty-nine allied nations. Awaiting him in the mountain passes is a bare seven thousand men, including Leonidas and his brave, desperate, three hundred Spartans in the pass at Thermopylae. With their backs to the wall, fighting for their homes, their wives and their children, they repel for days and days this overwhelming mass of barbarians; until in a naval battle off Salamis, Xerxes' mighty fleet of four thousand vessels is defeated by the Greeks with only 271 battle ships,—and the little Greek nation has demonstrated again the truth of this statement, that the battle is not to the strong. God, the God of battles, knew that the interests of civilization would be retarded by a Persian victory, and he taught their hands to fight. The far-famed Invincible Armada, of Philip of Spain, was invincible only in name, not alone because of the superior prowess or valor of Lord Howard and Sir Francis Drake, but because the interests of civilization and righteousness in the world would not have been advanced by a Spanish victory.

Learn this truth, class of 1912;—"Right may lose a battle now and then, but she never loses a war," and the poet is right who says,—

"Right forever on the scaffold,  
 Wrong forever on the throne;  
 Yet that scaffold sways the future,  
 And behind the dim unknown  
 Standeth God amid the shadows,  
 Keeping watch above his own."

If you would tread the paths of achievement, ally yourselves with the forces of right as against the wrong; even though sometimes those forces may seem feeble and inconsequential.

### 3. The Philosopher has Taught us Another Lesson when he says "Neither is there Bread nor Riches to Men of Understanding"

It is a common thing for public speakers to inveigh against that greed for gold which seems to be the crowning sin of the age in which we live. We hear much today from pulpit and press, of the unrighteous combinations of wealth, and the ethics of tainted money. I shall not enter into the ethics of wealth at this time, except to lay down two or three general principles. (a) In the first place the Almighty has never intimated that it is wicked or wrong for a man to become possessed of wealth, if he comes by it honestly. On the contrary, he has created some of us with the acquisitive faculty to the extent that we are bound to become rich. (b) In the second place, He has shown us that the increase of wealth, brings in its train great temptations. Temptations to greed, selfishness, and self-indulgence, which, uncurbed, will drown the better instincts of the soul. It is a dangerous thing too for a man to become wealthy and not at the same time receive enrichment of character. I commend unto you the reading of William Allen White's book, "A Certain Rich Man." It will help you to a right view of this whole question more than I can in the time at my disposal. (c) In the third place, wealth means stored and crystallized power, and this power may be used for good as well as bad purposes. I presume that you are all expecting to become successful practitioners, successful enough that by wise investments you may some day be accounted rich. Let me paraphrase Shakespeare for you,—“Some are born rich, some achieve riches, and—(ladies) some have riches thrust upon them.” I hope that all of you may someday become rich, if you can do so without deterioration of character. But here is another hope which I also cherish for you, that you become not only successful getters, but princely givers, lifting the world and humanity to better things by your benevolence and philanthropy. But do not make the mistake of believing that your superior intellectual grasp and professional preparation will cause you to get bread and riches. For many a man with less of both is likely to win the more conspicuous success in the field of achievement.

A college president said to me one time, "I would rather turn out ten men of mediocre ability and good preparation from my school than ten men of genius." I was younger then than I am now, and I said to him, "Surely you would not put a premium upon mediocrity, would you?" "No," he said, "but after all it is the mediocre men and women, in the common walks of life, who not only know how to think, but to work, who are doing things in the world." Now Class of 1912, I think I need

to give you one closing caution. A certain rather dull student plodded through college, taking six years to finish a course that he should have finished in four years. At last he reached the proud moment when his degree was placed in his hand by the president of the school. With a satisfied grin illuminating his homely features, he shook the sheepskin towards the faculty and said aloud: "Educated, by Gum!" The degree was his idea of an education and he was an educated man because he possessed it. Is it yours? In a little while, the "Old Doctor." (God grant that he may many times yet be spared to do it) will place in your hands the degree of Doctor of Osteopathy. You have worked for it and,—I trust have earned it. When it is framed and hanging upon the wall of your office, it will be one of the proudest possessions of your life. But that degree alone can never make you a doctor, it only certifies that you have taken the course which leads to the doctorate and that the instructors believe you to be proficient and worthy of trust.

Nine laymen out of ten who come into your office will not stop to read it at all, but if you lack the thing for which it stands,—they will find it out in a month, and leave you alone with your degree and your reflections. So then, you may consider that degree a responsibility to you, something which you are required to live up to.

One time a friend of mine had a beautiful bath-robe presented to him by some well meaning but misguided friends. There was no reflection upon his personal cleanliness in this for he had been in the habit of taking two or three baths every year,—whether he needed them or not. That bathrobe was the beginning of his troubles, for he soon saw the necessity of living up to it, by the installation of a bath room and all its accessories at an expense of over two hundred dollars. Doctor Hollis,—I would say to you and your class mates, that it is up to you to show what there is in you, and what you can do. I trust that during the three years you have spent within the walls of the American School of Osteopathy, you have dreamed dreams and seen visions, for the castle must exist in the air, before its foundations are laid upon the solid earth of reality. When Sir Isaac Newton was a boy ten years of age, he came to his mother one evening with tears in his eyes and tears in his voice and said to her, "Mother, I want the moon!" "Nonsense, my child" said the matter-of-fact mother, "you cannot have the moon." "Yes, but I will have the moon," replied the boy, and he never ceased to cry for the moon, and seek for the moon until he was a mature man. And when he reached manhood estate, because of these dreams of his childhood, God gave him the moon and a whole universe of stars thrown in for good measure. But, for you the hour of dreaming is

over and the hour of doing has come. Go out into the great world and take your place as men of action and find a way, or make one. Give the world the best you have and are and the world will honor you. Thus will you be able to reach the heights! Thus will you tread the paths of achievement!

January Class of 1912; I salute you, and bid you,—Bon Voyage!"

The graduation exercises took place on Thursday, January 25th and were simply and effectively carried out. The following description is taken from the local paper:

The graduation exercises of the January class of 1912 of the A. S. O. were held in Memorial Hall this morning in the presence of a large audience. The program commenced at 8:30 A. M. with a selection by the Orchestra, during which the class marched to seats on the platform in North Hall.

The first speaker was Dr. A. S. Hollis, the president of the class, who had selected for his subject "The future of Osteopathy" and who in a few well-chosen remarks dwelt on the importance of the independence of osteopathy as a school of practice, emphasizing the necessity for the graduates and the practitioners, in maintaining that independence, to join the various associations, to encourage research, to stand firm for higher educational requirements and to make the advancement of osteopathy the foremost aim and object of their lives.

Dr. C. E. Medaris then read the history of the class and cleverly touched upon the various aspects of the life of the class, making mention of the different ventures that had been entered upon since the day of matriculation. The history was replete with references to the relations of the class to the other classes in school and was well received by the audience.

Dr. "Charlie" then announced that the Hon. John E. Swanger, whose name was on the program as the speaker of the day, would be unable to be present owing to some quite unforeseen bank smash, which made his presence in Kansas City absolutely necessary, but he had pleasure in presenting in his place Dr. A. G. Hildreth of St. Louis.

Dr. Hildreth had been called upon at the very last moment, but as usual was more than able to fill the bill, and delivered a fine address to the graduating class, touching upon some old remembrances of osteopathy and inspiring all his hearers with a renewed faith in the future that was before them, and in the power of the science that they were to practice. His speech was certainly a fine one and all felt most grateful for his helpful and inspiring remarks.

The "Old Doctor" then made a splendid talk and the proceedings were ended by the presentation of the diplomas. The entire program was a complete success, and the audience was loud in its applause of the members as they were given their "sheepskins" which had meant so much hard and earnest work.

It might be added that some of the graduates were presented with special certificates for their work in the Anatomical Laboratory, having acted for one or more terms as prosecutors for the dissecting groups. One of these, Dr. Hollis, has been in charge of the Dissecting Course for a year and a half and the others have been in charge of individual tables during that time. The four members are: Dr. A. S. Hollis, Dr. C. Eloise Houriet, Dr. Harry W. Sawyer and Dr. Roy M. Wolf. These special certificates are much sought after and their acquisition is a matter of considerable honor for their owners.

## The Way It Happened

A little girl was teaching her dolls a Sunday-school lesson.

"Children," she said, "you know God made Adam and he was very lonely, so God put him to sleep and took out his brains and made a fine lady."

# The Ascending Colon

(Illustrated).

By F. P. MILLARD, D. O., TORONTO, CANADA.

Science ceases to be such when it conflicts with the laws of nature. Radical measures ever tend toward the line of demarcation between science and truth, and whenever these conditions exist, we are treading on dangerous ground.

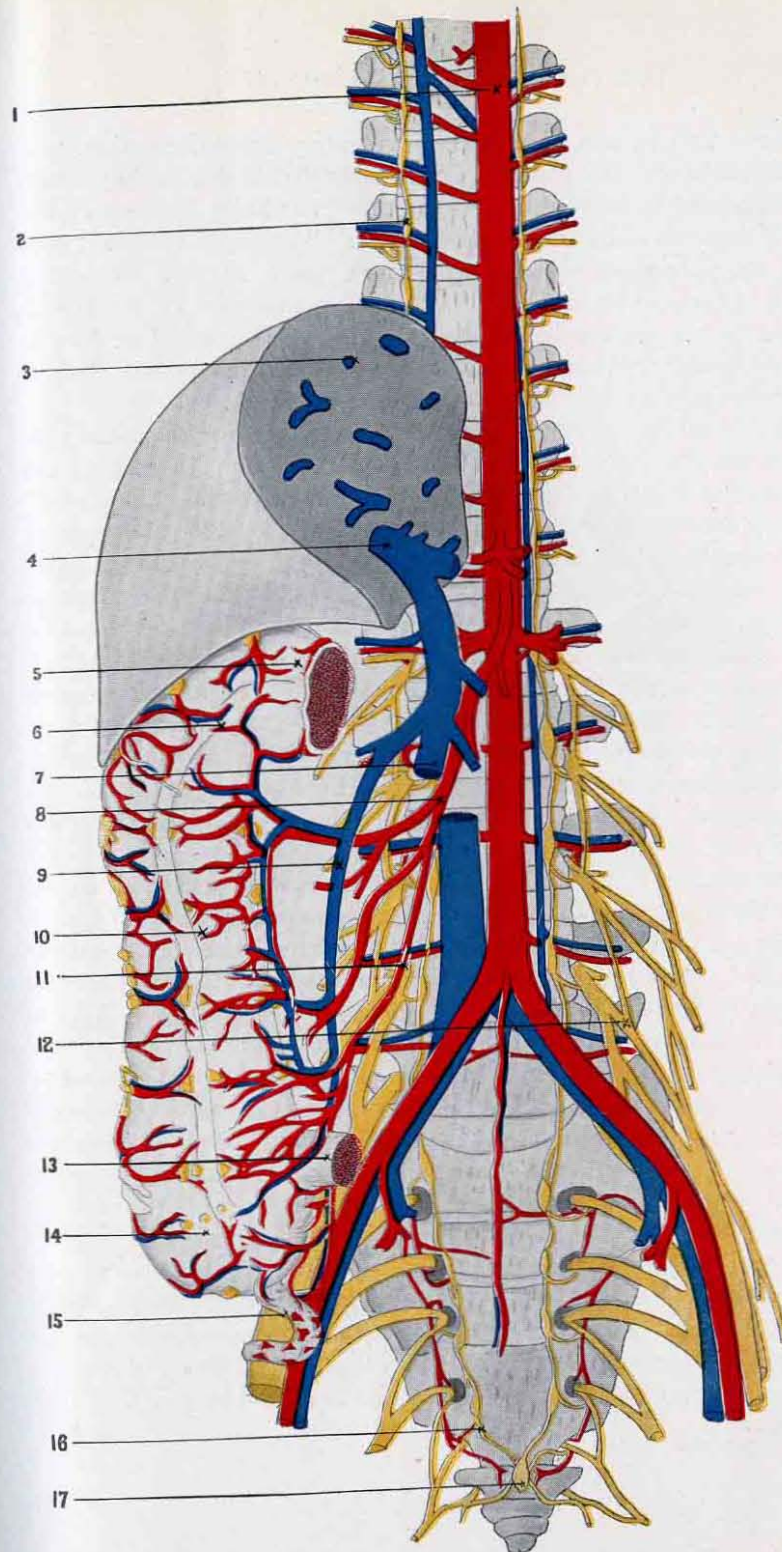
Surgery has advanced step by step until at the present time it is considered a science. There are extremists and faddists in all well regulated schools, and surgery should not be judged by the few who take delight in experimenting at the cost of human life. (Vivisection, confined to the lower animals in the interest of science, with proper anesthetic precautions, is a different matter).

The removal of the colon, as advocated by the great European surgeons is not in harmony with nature's laws, let alone being scientific rationalism.

Topographically, the ascending colon is located at a disadvantage. (Fig. 1) Anatomically, its relations are contaminating. Physiologically, it is a flatulent center connected with the caecum, a veritable cess pool. Pathologically, it is prone to inflammation and resultant adhesions. Its terminology is its only redeeming feature.

Bacterial invasion is confined to a great extent to this section of the colon.

The function of the ascending colon is somewhat disturbed at times, through indiscretions, when undigested material is dumped into it before total selection and absorption of the products considered as food have taken place. The colon is thus made a common sewer, instead of a receptacle for a partial drying out process previous to expulsion. Digestion ceases at the ileocaecal valve. The glands which we find distributed along the various portions of the small intestines have become diminished in number until very few are found of some varieties, and practically none of others. The greatest function of the colon is the drying out of the mass of partially or totally digested material passed on from the stomach. The colon does not seem to object materially to semi-solids and gases, as far as the ascending or the transverse colon is concerned, but approaching the sigmoid flexure and rectum,



liquids are irritants, and disturb the involuntary muscular action, producing relaxation of the spincter. The peristaltic action usually found in the intestines is regulated through the splanchnics by way of the sympathetics, especially in the mesenteries. We also have spinal control of the intestinal circulation through these nerves. Peristaltic action is influenced by various disturbances or irritants. If the bowels are hyper-active we are led to believe that the increased peristaltic action is through irritation or stimulation of these nerves, and the reverse condition when over stimulation has taken place.

Possibly no one factor is more important, in considering the condition or tone of the colon, than that of circulation. In making our diagnosis after thorough examination, we naturally picture in our minds (Fig. 1) the nerve and blood supply to this section of the tract, and especially the vasomotor, which not only rules the mesenteric arteries to the colon, but the vasomotor control over the portal circulation which relieves the tissues, of the blood contained within them, and as nerve tissues depend upon nutrition for their normal functionings we consider also the regulation of the blood supply to the nerve centers and plexuses through which these mesenteric nerves pass. If vasodilatation is in excess, intestinal secretion will be increased as well as peristaltic action of the muscular fibers found in the intestinal walls. It is through Meissner's and Auerbach's plexuses, which are arranged almost identically as in the wall of the stomach, that we control these intestinal functions. If the vasodilators are stimulated, and an increase of blood is flowing to these parts, the excess of secretion and motion will produce a pathological phase indicating correction before the nerve tissues are too greatly weakened, because over-stimulation produces exhaustion of the functioning powers of the bowel wall, as well as of any other organ or tissue, and the normal effect is lost.

Mechanical pressure has a great deal to do with disturbance of the vascular phase of this subject. For instance, an impacted caecum will press downward on the vessels (Fig. III) just behind this section of the tract, producing a venous stasis and possibly temporary congestion; and a prolapsed condition of the transverse colon will cause an acute angle to form at the hepatic flexure, interfering with the progress of the peristaltic movement of the ascending colon. Pain scattered over the region of the caecum and appendix may come from the nerves in relation to the eleventh rib, as they supply cutaneous sensation to the region over the appendix. A lesion about the tenth thoracic may cause cutaneous irritation, and must be kept distinct from deeper iliac pain if it exists.

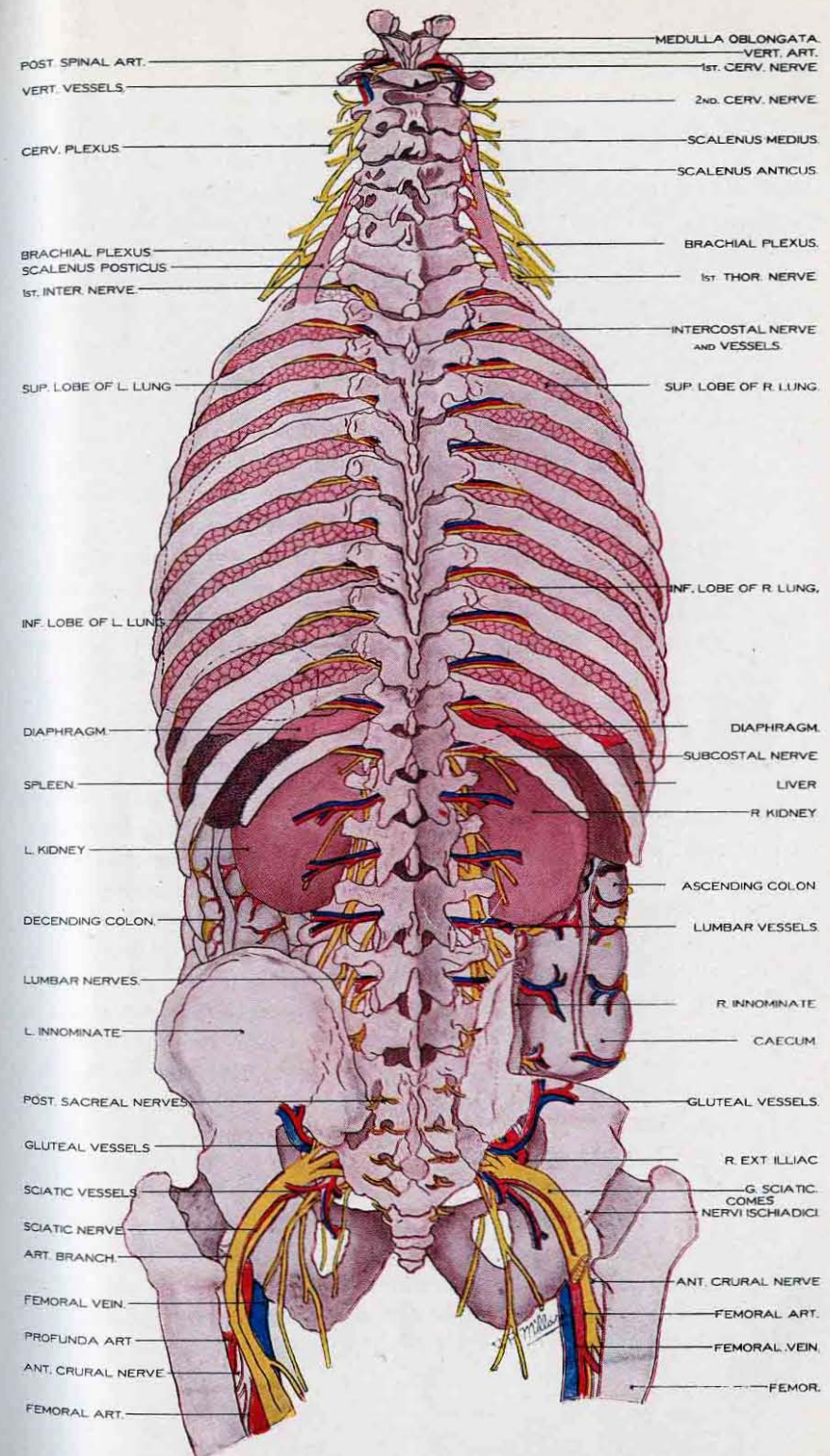


Plate II. (F. P. Millard)—Innominate cut away showing position of the ascend-

The most common cause of bowel inactivity, outside of a sluggish liver, is disturbance from the sixth to the eleventh thoracic, (Fig. II) interfering with the normal functioning. While a lesion at a higher point may cause trouble, and possibly at a lower point, yet almost invariably the disturbing primary cause is from the sixth to the eleventh thoracic. Lesions of the lower ribs, as well as internal organic displacements, may also be found, but if no irritation exists to the splanchnic nerves there is no great likelihood of enteroptosis and if no splanchnoptotic condition exists, no venous congestion is likely to result and the portal circulation will remain in normal tone, which is most necessary to relieve abdominal congestion.

As stated, vasoconstrictors in the splanchnic nerves control the mesenteric blood vessels, and vasodilator fibers are also found. It is not uncommon to have the heart affected if impactions exist, due to the interference with the vessels draining the intestines. Auto-intoxication is likely to result and almost invariably gastric complications. Irritation of the colon is sometimes the result of nephritic conditions, as the bowels sometimes serve to relieve the kidneys of their extra duties. There is one interesting point regarding the nerve control in the intestines, and that is, they are not totally dependent for either muscular or peristaltic movement upon their connections with the central nervous system, making them like the stomach, automatic; regulated through extrinsic nerves. Visceromotor nerve fibers originate mostly from the vagus, and sympathetic chain. Irritation of these nerves will cause abnormal movements of the muscular fibers. Evidently the nerves already mentioned are connected indirectly with the cranial centers. For example, psychical states are known to influence intestinal movements, and experiments have been made in which stimulation of the cerebral cortex has produced results in the intestinal walls. Likewise movements may be produced by shutting off the blood supply and temporarily reestablishing it.

It is almost impossible to confine one's remarks to the ascending colon when its associated parts are so interesting from a clinical standpoint. Possibly it would have been better to have written on the caecum instead, but being its most adjacent part, it will not hurt to include a few features in this article.

Surrounding the ileocecal valve is a sphincter preventing the backward flow of the contents poured into the caecum from the ileum. (Fig. I and II) Experiments have shown to a certain extent anti-peristaltic action of at least the ascending colon, and possibly a part of the transverse colon. This we understand is for the purpose of retarding the too rapid

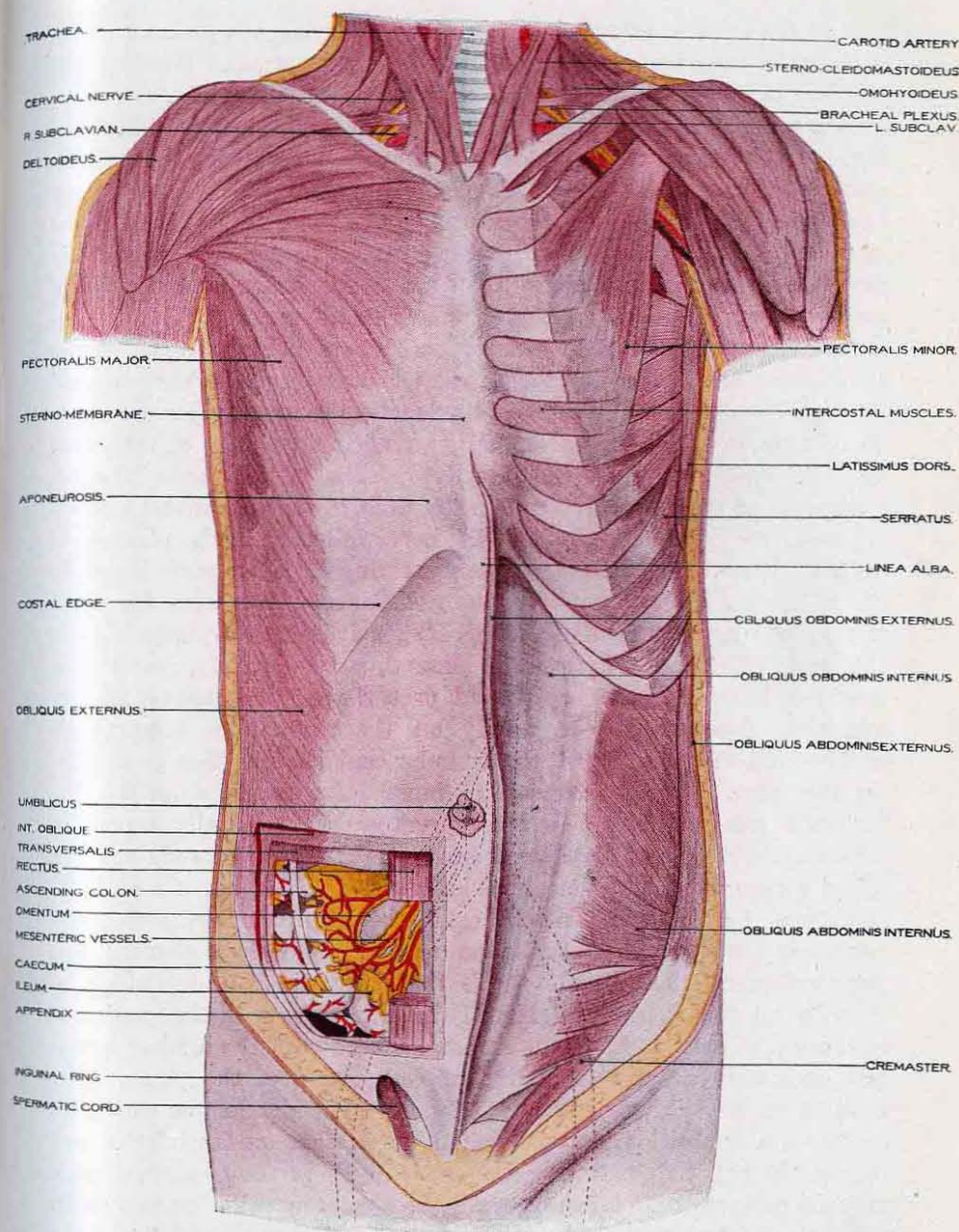


Plate III. (F. P. Millard)—Abdominal muscles removed showing topographical position of the ascending colon; its blood supply, and its relation to the adjacent viscera.

flow of the colon contents, in order that the drying out process, which is the chief function of the colon, may be most normal. Whether the plexuses of Auerbach and Meissner, found in the intestines, are more sensitive than those found in the walls of the stomach, it is difficult to say; but the control of these plexuses, through longer nerve fibers which pass by the way of the splanchnic nerves and mesenteric plexuses, may have something to do with the unstable condition often found in the intestinal walls. Again the spinal nerve centers to the three splanchnic nerves, cover a greater territory than the nerve center controlling the gastric walls. A greater variety of spinal irritations (Fig. II) or irregularities may exist disturbing this portion of the alimentary tract. While the caecum is simply a receptacle from which its contents pass onward through the ascending colon, yet its function is most important from its relation to the ileocaecal valve, guarding the entrance of the small intestine which is strictly the digestive portion of the tract. The arrangement of the muscular fibers in the walls of the caecum and ascending colon are quite the same and the nerve influence in the plexuses is quite the same. The imaginary line separating these two parts is simply one of anatomical topography. The vascular supply is from the same artery; the superior mesenteric. (Fig. II) The lymphatic drainage is quite the same. The ascending colon is allowed, physiologically, about two hours for its contents to be emptied past the hepatic flexure, and its normality depends almost wholly on the amount of enteroptosis existing and the condition of the vascular and nervous tissues supplying this part. It is no stretch of imagination to figure out the disturbance existing from a spinal curvature or irregularity especially between the fifth and twelfth thoracic vertebrae. Not only are the spinal nerves and their connections indirectly affected, but if a scoliotic condition, for instance, should exist, the relation of the abdominal viscera is altered and if less than normal room is accounted for, abnormal mechanical interference is likely to exist. A depression of the ribs on the right side (Fig. II) may interfere with the quadratus lumborum muscle, and a slight scoliotic condition of the lumbar vertebrae may cause undue relaxation or contraction of the psoas. The position of the kidney may be altered. The duodenum may also assume a new position, and the colonic depression on the inferior surface of the hepatic gland may deepen, (Fig. 1) or the ascending colon may be compressed. If compressed, the ascending colon crowds down upon the caecum and venous stasis occurs, which may complicate the pelvic organs and tissues, especially in the female. We have purposely avoided mentioning the vermiform appendix, (Fig. I and III) as that

necessitates a full discussion in itself, which would take too much space, but the same conditions affecting the colon and caecum usually complicate this tissue and resulting disturbances may occur in the way of adhesions as far up as the ascending colon. The attachment of the colon to the tissues adjacent through the peritoneal and mesenteric tissues are important, and if normal, it is sufficient to suspend it in proper anatomical relation. It is no difficult matter to change the entire topography of the abdominal contents through spinal curvatures, lesions, and lack of tone in vasomotors, as well as the prevertebral plexuses in that region. Perfect adjustment is of prime importance.

### Summary

The ascending colon is disadvantageously situated topographically. Its radical removal is contra-indicated physiologically. Bacteriologically it is the weakest portion of the colonic tract. Functionally it is the most important section of the colon. From a peristaltic standpoint its motion is somewhat reverse to that of the remaining portion. Its vasomotor supply is through nerve fibres by way of the mesenteric plexuses, coeliac ganglion, and are pre-ganglionic in nature, as these fibres emanating from the spinal cord pass through the sympathetic ganglia and continue as such until they reach the Auerbach's and Meissner's plexuses. From a lesion standpoint, the splanchnic area is far greater than that to most of the other organs, adding to the etiology of colonic disturbances.

The vasoconstrictor control of the ascending colon is no more important than the vasomotor control of the portal circulation acting as drainage. The obstruction of the portal circulation through hepatic cirrhosis and other complications, such as irregular cardiac and nephritic conditions, are to be considered. From a mechanical standpoint an impacted ascending colon and caecum produces changes in plevic symptoms, as well as vascular irregularity, possibly not equalled excepting in splanchnoptotic conditions. Reflex pains from viscera-motor or trophic disturbances are of prime importance in making accurate diagnoses, as superficial right iliac pain often comes from the tenth or eleventh thoracic lesions.

The nerve control, regulating peristaltic movements is automatic in part, the same as in the stomach. The mesenteric plexuses form a part of the autonomic system, and if irritated by lesions, produce nervous instability resulting in altered peristalsis, which is relieved upon correction of thoracic abnormalities.

The physiological condition of the ascending colon is dependent partially upon the normality of its adjacent tissue and organs, such as liver, kidney and duodenum; and the normal anatomical position of the ascending colon depends upon the lack of lumbar (especially scoliotic) and lower dorsal irregularities; and the peritoneal tissues around the colon are abnormal when the adjacent organs are physiologically disturbed.

## Baby

AFTER GEORGE MACDONALD—FIFTY YEARS AFTER.

Where did you come from, baby dear?  
Consult any good work in biology.

Where did you get those eyes so blue?  
They are inherited from great-uncle Peter; the family eye is brown.

What makes the light in them sparkle and spin?  
The refraction of waves of ether through transparent lenses.

Where did you get that little tear?  
Certain emotions, most of which I have experienced, act automatically through the sensory nerves upon the tear glands.

What makes your forehead so smooth and high?  
Its smoothness is pathological; and it is high because my new hair has had little time to grow as yet.

What makes your cheek like a warm white rose?  
Poetic license, probably. Everyone else says, "How red he is!"

Whence that three-cornered smile of bliss?  
Wind.

Where did you get this pearly ear?  
Heavens! Is my ear pearly? I haven't seen it but it must be some horrid malformation.

Where did you get those arms and hands?  
Anatomy covers all that.

Feet, whence did you come, you darling things?  
See previous answer.

How did they all just come to be you?  
Evolution and psychology offer what there is to be said on the subject of individual identity.

But how did you come to us, you dear?  
The whole thing is a matter of creation. The truth about it lies somewhere between Genesis II. and modern scientific research.

—CARL BROWN.

## Forum

EDITOR JOURNAL OF OSTEOPATHY:

Dear Sir:—In your last issue Dr. Archer drew attention to a mistake I made in stating that the 20th Century Encyclopedia, which made its plea for popularity on the ground of its "up-to-dateness" said nothing of osteopathy nor A. T. Still. I acknowledge that error and am glad to have it corrected. It was simply made in this way. I have two encyclopedias and did not wish another. My associate felt he would like to have this one if he could get it at the price it was offered to me in consideration of my recommending it if I found upon investigating it I could do so. This was arranged with the agent. When the works came my associate looked it over. I suggested that he see what was said of Osteopathy. He did; found nothing and showed me. A patient in the room also noted the seeming omission. Then we looked for Still, and found nothing at all. Our error occurred in there being two sections to each letter in this cheap work. As this occurs in no other encyclopedia we did suppose but that when we came to osteo—that osteopathy would be in that vicinity. The devil, even, should have his dues. Since Dr. Archer's letter I have glanced a little more carefully through the work and while I cheerfully acknowledge that I was in error in stating that osteopathy was not mentioned, I as cheerfully can say that no one who wishes an encyclopedia characterized by "up-to-dateness" will make a mistake by NOT buying the 20th Century Encyclopedia.

The division of every letter into two section of subjects, which caused our error, is misleading and a time killer. What you want is frequently in the section you did not first look in.

The whole work savors of having been written ten or more years ago, although it was put out in the latter part of 1911.

All reference to commercial matters or population throughout the work are in the figures of the 1900 census. The 1910 census is merely stuck in as an insert in the back of the last volume.

In fact the figures used in the two inch reference to osteopathy would apply eight or ten years ago. It is stated that "there are now about four thousand practitioners in the United States and foreign countries. The science has received legislative recognition and protection in twenty-three states and there are ten established colleges



where it is taught through a three years course of study, to a student body only second in numbers to any school of therapeutics."

We have nearer six thousand practitioners now. We are recognized by board representatives in thirty-two states and by examining committees in others. In fact there are only four states in the Union where osteopaths do not take state examination and receive "recognition and protection." By consolidation we have eight colleges where we had ten, years ago.

Fraternally yours,

ASA WILLARD.

**An Appeal From the Medical State Board of Examiners of the State of Washington. July 5th, to 8th, inclusive, 1911.**

Thinking it might be of some interest to my friends and to the profession in general, and that it may be of some benefit to those who contemplate taking the examination under the above mentioned Board, I wish to relate the experience which I have just passed through with this examining Board, which has covered several months in bringing about justice to me, that I should have been given at the close of the examination last July.

I will make no accusations or false statements, but I intend to relate the true happenings that the reader may draw his own conclusions as to whether or not the method of conducting the examination and in issuing certificates is one which will deal justly with all applicants.

We convened at the High School building in Tacoma, on the 5th day of July, to begin the examination.

Instructions were given us as follows: We were to be examined in eleven subjects, consisting of twelve questions each, of which we were to answer ten only. We were to be allowed one hour and thirty minutes on each subject, but were given only one hour and twenty minutes in one or two instances, and in subjects that the time should have been lengthened insted of shortened. One of these subjects was General Diagnosis. We were provided with cards with stubs attached. The number on the card corresponded to the number on the stub, and it was by this number only that we were to be known until our papers had been graded and our license granted or refused. The applicant's name, the school from which he graduated, and the address to which he wished his license sent, if he passed, were written on the card. According to the law this card was to be sealed in an envelope by the applicant and

then given to the Secretary of the Board and was not to be opened until the applicant's papers were graded and passed upon. The applicant was to be known only by the number, which he was to place upon every sheet of his papers. But, we filled the cards out as requested and were told to tear off the stub with the number and keep it, and then the members of the Board collected our cards, saying that they had no envelopes for the cards. They were collected openly and were never sealed, and could have been inspected at any time. Later, envelopes were passed around for us to put the stub in and keep it for reference in case we forgot our number.

The examination passed over and we returned to Seattle and waited anxiously for returns, which came the first of the next week stating that only one D. O. passed out of five.

I was then anxious to know in what subjects I failed and made a trip to Tacoma, and called upon Dr. Thomas, an osteopathic member of the Board, and made inquiries as to my grades and what subjects I failed in, and knowing that he was one of the members that represented our profession, I presumed that he would know where and why I had failed, but am sorry to relate he knew nothing about it, only that one D. O. had passed and four had failed. Upon questioning him I found that he had not seen any of my papers except the subject that he examined in. Later calling upon the other osteopathic member, Dr. Garrigues, of Spokane, I found that he knew nothing at all about my failing, or the other D. O's., only that one had passed and four had failed. I also found that he had seen none of our papers except the subjects that he examined in, and in fact left the Board meeting before all the applicants were passed upon, leaving us to the decision and mercy of the rest of the members of the Board, and not giving their profession due representation at the Board meeting.

I then requested, of the Secretary, Dr. Witter, of Spokane, my grades in all subjects and especially in those in which I had failed. Some of these I received from two or three sources, but they did not correspond. I then asked for my papers, or to be allowed to make a copy of the same, and this was denied me until after thirty days had elapsed, it being that an applicant has but thirty days to make an appeal from the Board, and I was instructed that the only way I could get my papers before then was to get an order from the Court.

When I called upon Drs. Garrigues and Witter, I asked them if it was possible for them to get a reconsideration of my papers, in case there might be a mistake in the grading on the papers in the subject,

General Diagnosis, but this failed and they assured me that my papers had been graded all they were possibly worth, which was 54%, although they had not seen my papers and one had left the meeting before the business had been completed. Dr. Witter stated to me that the Boards first decision was final and that it could not be changed, and advised me to take the next examination. The same advise they give to all who fail.

Through my lawyer, we drew an appeal and filed it immediately, and got an order from the Court to give me access to my papers and to take copy of the same, and this we got after some hesitancy and delay. We then had my papers examined by disinterested physicians, some D. O's. and some M. D's. all of whom graded them ranging from 70% to 96%. The case was docketed at Tacoma, to be heard on October 11th, at which time it was postponed until November 9, 1911. In the meantime the Board was busy going over my papers again and had disinterested physicians, in Seattle and in Tacoma, grade them, and a petition was circulated among the members of the Board for them to sign if they were in favor of granting my license, as there had been a "mistake" in grading the paper and it was entitled to a passing grade of about 82%. Suffice to say that the petition was unanimously signed. The compromise was then put to my lawyer, that the Board would issue me a license if I would dismiss the case. This we agreed to do and I received my license on the 4th of December, 1911, when it should have been in July, had it not been for a "mistake" which they refused to look into until compelled to do so.

There is no use in using space in trying to tell of the esteem in which I and others hold this particular Board, but I think the reader will get the idea.

I wish to speak of two of the requirements this Board puts into the examination which were overruled by the Court's decision, in the case of an M. D., who took an appeal which was heard before Judge Clifford, at Tacoma, about the 19th of last October. The Court ruling that the Board had no authority to add requirements other than those stated by law.

One of these was the requiring of a general average of 75%. The law says nothing about a general average, but that a grade of 60% in each subject is a passing grade. The other is an examination in a subject designated as Practical Work, in which the applicant is required to examine specimens under the microscope and name them, in Histology, Pathology and Bacteriology. The applicant is then conducted to the

Hospital and ushered into the wards, given a particular case to examine and diagnose after which he is subjected to an oral quiz of from one to many questions. In my case it was only thirty eight oral questions.

DR. J. L. WALKER.

Jamesburg, Md., Jan. 19, 1912.

#### JOURNAL OF OSTEOPATHY:

Dear Sir:—In the December issue, page 877 I note Dr. Willard's letter in reference to 20th Century Encyclopedia.

Last week I purchased of the Cambridge University Press the Encyclopedia Britannica, 29 volumes (which is now widely advertised).

I am sorry to say the word Osteopath does not appear in these books. Surely there is a reason?

Yours fraternally,

EDWARD C. GALSGIE, D. O.

## Associations

**Oregon Association Meeting.**—About seventy-five osteopathic physicians attended the tenth annual meeting of the Oregon Osteopathic Association January 13th at Portland. This was the largest meeting in the history of the Association. Dr. W. J. Ford of Seattle and Dr. Walker of Ellensburgs were visitors from Washington and added to the success of the meeting with enthusiastic remarks. The morning was devoted to business. Oregon Association for over a year past has planned on entertaining the American Osteopathic Association in 1915, the year of the Panama Exposition, and it was unanimously voted to formally extend the invitation. We have the best of hotels, a beautiful city, a perfect summer climate, and good osteopathic workers, and with low fares which will be in order, we should have one of the most largely attended conventions. It was again voted to work for the formation of a tri-state osteopathic association, consisting of Idaho, Oregon, and Washington, the meeting to be held at the time of the Portland Rose festival or the Seattle Potlatch, insuring low fares. Our telegram of greeting and love was sent the Old Doctor. A resolution presented by Dr. F. E. Moore, was adopted relative to our attitude toward the National Health Board measure which conforms to the platform in Dr. Hildreth's presidential message to the A. O. A. Two of our members who recently returned from studies in this country and Europe addressed the meeting. Dr. Otis F. Akin talked on orthopedic surgery and presented a number of interesting clinics, while Dr. F. E. Moore discussed osteopathic progress with comparative observations of clinics,—European and American. Dr. Akin is an osteopathic surgeon of unusual ability, and as he is confining his work almost exclusively to surgery, his services are in demand throughout the Northwest. General clinics were in charge of Dr. B. P. Shepherd. Demonstration of Technique of Innominate Lesions, based on original observations, was presented by Drs. E. T. Parker and Dr. Gertrude Lord Gates. Other subjects, Upper Four Ribs, by Dr. Lena R. Hodges. Fifth, Sixth and Seventh Dorsal Vertebrae, by Dr. Mary E. Giles. Dr. G. S. Hoisington gave a most enthusiastic report of Chicago's great A. O. A. Convention, and urged attendance at Detroit. Portland Association was the host of the Oregon Association at lunch. Dr. Gertrude Lord Gates was the retiring president, and delivered a strong presidential address. Officers for ensuing year,—Dr. B. P. Shepherd, Portland, President; Dr. Virginia Lewcaux, Albany, Vice-President; Dr. W. G. Keller, Portland, second Vice-President; Dr. Lillian Baker, Portland, Secretary; Dr. L. H. Howland, Portland, Treasurer; Dr. H. C. P. Moore, Portland, Editor. Trustees, Dr. A. P. Howells, Dr. W. A. Rogers, Dr. R. W. Walton; Legislative Committee, Dr. R. B. Northup, Dr. G. L. Gates, Dr. W. L. Merser, Dr. B. H. White, Dr. W. A. Rogers. Program, Dr. F. E. Moore, Dr. G. S. Hoisington, Dr. Leroy Smith.

The resolution, mentioned above, as introduced by Dr. F. E. Moore and unanimously adopted reads as follows:

"Whereas, the bill creating a department of public health offered in Congress by Senator Owen, or associated measures to the same end, might be construed to permit the Interstate Commerce Commission or persons in the Government service to go into states and use Government authority and money to increase, if not compel, the use of certain remedies or modes of treatment;

"Be it resolved that we, the Oregon Osteopathic Association, urge instead a measure to create a bureau or division of sanitation and public hygiene whose chief representative shall not be a graduate of medicine, but a sanitary engineer, and provide for an advisory board composed of one member from each of the recognized schools of medicine to exert itself to prevent contamination and pollution of streams and enforce cleanliness and the proper quarantine in contagious diseases, to better tenement-house conditions, and increase hygiene and safety in mines and factories, and spread among the people a knowledge of the desirability and means of accomplishing the same, but shall not permit the treatment of diseases nor enforce other measures of prevention than to eliminate the cause of disease and conditions which breed and spread disease.

"Further be it resolved that we believe such a measure by meeting general public approval and support would go farther toward maintaining health and preventing disease than the Owen bill and like measures, and at the same time would not violate the rights of the citizens to control their own bodies and those of their children."

**Minneapolis Osteopaths Meet in Fairmont.**—The Osteopathic Convention held January 11th in Fairmont was well attended even though the weather conditions and train service was very unfavorable. It indicated great enthusiasm on the part of the doctors present.

Most all who were to take part on the program were present and all parts of the state were well represented.

During the business session Dr. W. H. Bedwell of Mankato was elected by unanimous vote as the candidate for membership on the State Board of Osteopathic Examiners to take place of Dr. F. D. Parker of St. Paul, whose term soon expires.

Dr. Bedwell has yet to be appointed by the governor of the state.

Dr. C. W. Johnson of Des Moines, Iowa who is professor of Pathology and Bacteriology in the Des Moines College of Osteopathy gave a very interesting lecture on the relation of these two branches of science to Osteopathy.

Dr. A. D. Becker of Preston, Minn., president of the state association gave a very interesting talk on infectious and contagious diseases and their treatment. He said he much preferred to treat the acute diseases. They are self-limited and require less skill and effort on the part of the physician than do the chronic diseases.

"The cure or failure of cure of acute infectious diseases depends on the vitality or resisting power of the body. The disease is a fight between the germ or micro-organism and the body forces and the outcome depends on how well the body is able to stand the dose of poison thrown into the tissues by the action of the germ. There is no drug that has any effect whatever on these diseases per se, as a drug strong enough to kill the germ would kill the living tissues of the body and cause death."

The treatment therefore, is directed to the support of the patient's vitality and as it has been demonstrated that Osteopathic treatment increases the vitality of the body, this with good nursing, Hydrotherapy, proper diet and general care is the ideal treatment for such diseases.

During the course of the convention the following resolution was presented.

"Resolved that we extend our hearty thanks to the citizens of Fairmont for the cordial welcome extended to us; and to the county commissioners for the use of the convention hall.

"Also to those who appeared upon the program and made it interesting and profitable and to the Southern Minnesota Association, and the local osteopaths for arranging and providing the program."—Dr. F. E. JORRIS, Chairman of Committee on Resolutions.

**Semi-Annual Convention of Virginia Osteopaths.**—The Virginia Osteopathic Association met January 20th at Hotel Carroll. The meeting was called to order by the president, Dr. A. J. Snapp, of Roanoke, and the election of officers for the ensuing year, which was first on the program, resulted as follows:

President, Dr. J. Meek Wolfe, of the firm of Shumate & Wolfe, Lynchburg; vice-president, Dr. S. H. Bright, of Norfolk.; Secretary-treasurer, Dr. W. D. Bowen, of Richmond. Executive committee: Dr. C. R. Shumate, Lynchburg; Dr. Richardson, of Norfolk and Dr. H. S. Beckler, of Staunton.

The society adopted the following resolution:

"Whereas, There is considerable agitation in the Virginia Legislative Assembly at this time regarding the enactment into law of bills proposed to govern the different methods of treating disease, injury and deformity as taught by the reform schools, and

Whereas, These reform schools, holding themselves out to treat disease, injury and deformity prosecute a course of training varying from four to thirty-two months; and

Whereas, The public health is best safeguarded by stringent laws calling for a high educational standard and efficient training in the fundamental essentials of medicine for all schools, and reform schools of healing; and

Whereas, The present statutes of Virginia, enacted March 10, 1910, provide for a single board of medical examiners and

Whereas, The Virginia Osteopathic Society and its individual members, have found this board of medical examiners to be an impartial board in the execution of its functions and an adequate and valuable safeguard to the public health;

Be it, and it is hereby resolved, That the Virginia Osteopathic Society go on record as opposed to the establishing of separate boards for the various reform schools, and thoroughly in favor of the present law compelling all applicants for licensure of whatever school to pass the State Board of Medicine with the exception of Materia Medica and Therapeutics for schools practicing drugless healing."

After all business was transacted the members retired to the private dining room of the hotel, where an elaborate banquet was served the visitors by the local osteopaths, Drs. Shumate and Wolfe. Prominent among those present from a distance were Drs. Willard, Bright and Richardson, of Norfolk; Dr. Shackelford, of Richmond; Dr. Snapp, of Roanoke, and Drs. Beckler, of Staunton. The meeting adjourned to meet in Norfolk, June 15 to 20.

**Out for the 1913 National Convention.**—One of the most important matters to be brought to the attention of the Washington State Association of Osteopaths in this city early in April will be the starting of a campaign to bring the national convention to Spokane in 1913.

The movement will be started by Dr. T. C. Morris of Spokane, president of the state association.

"It would mean a whole lot to this part of the country to have the national convention of the American Osteopathic Association held in Spokane," said Dr. Morris today. "I attended the session in San Francisco in the summer of 1910, and it was a great meeting. About 600 attended, and as there has been a steady growth since that time, many more will attend the 1913 convention. This summer the association meets in Detroit.

"I intend to hammer on this subject a great deal during the state association convention in Spokane early in April, and I have hopes of stirring up enough enthusiasm to send a large delegation to the Detroit meeting."

#### SAW LORENZ WORK.

Other things to which the osteopaths of the state will devote their attention at the Spokane meeting will be clinics and scientific papers. Dr. Otis Akin of Portland, who has recently returned from an extensive tour of study in Europe, where he watched the work and methods of Dr. Lorenz and other famous specialists in orthopaedic surgery, will tell of his observations.

The Spokane Society of osteopaths is planning to inaugurate a system of weekly meetings, at which study will be engaged in along the lines of the various problems of osteopathy.

**Western New York Osteopaths Meet.**—At the meeting of the Western New York Osteopathic Association held at the Satler hotel on the evening of January 13th Dr. F. C. Lincoln presided and members were present from Niagara Falls, Jamestown, Rome, Wellsville and elsewhere.

Unusual interest was shown by the attendance of nearly fifty osteopathic physicians from various nearby towns.

Goitre in its various forms was the topic under discussion. Dr. C. W. Proctor of this city read a paper on exophthalmic goitre and led in the discussion which followed. Among the physicians from out of town who attended the meeting were Drs. Larter and Davis, of Niagara Falls; Dr. Jameson of Jamestown; Dr. Miller, of Wellsville, and Dr. Miller, of Rome.

Another subject of discussion was the advisability of establishing an osteopathic sanitarium at or near Buffalo, and a committee was appointed consisting of Drs. Charles W. Proctor, George T. Cook and A. S. Wiley. On the subject of osteopathic examiners for the public schools a committee was appointed consisting of Drs. Dieckman, Brewster and Marion Whittemore.

**Polk County, Iowa, Osteopaths Adopt Resolutions.**—Tuberculosis was the principal subject of discussion at the regular meeting of the Polk County Osteopathic association January 19th at the office of Dr. Harvison in the Securities building.

The following resolutions introduced by Dr. C. E. Thompson were adopted:

"Whereas, In times past the physician held the confidence of his patient as almost sacred and exerted his whole ability honestly for the health and welfare of his patient, and

"Whereas, In these later times there has arisen a tendency to barter that confidence for mercenary purposes and to jeopardize the health and welfare of the patient for gain, and

"Whereas, The physician receiving a division of the fees for referring his patient to a surgeon or specialist is one of the gravest of these tendencies, and

"Whereas, This practice is not and has not been tolerated by the osteopathic profession; therefore,

"Be It Resolved, By the Polk County Osteopathic Association assembled, that we deplore the commercializing of a noble profession and declare that a physician should receive no fee from the patient referred to a surgeon or specialist."

**Third District Illinois Osteopaths Have Annual Election.**—The Third district Osteopathic Association met on January 10th at Dr. Brown's office, Galesburg, with a goodly number present, it being the time for the annual election of officers. Those elected were: Dr. E. J. Mosher, of Kewanee, President; Dr. F. G. Thiele, of Galesburg, vice-president; Dr. M. P. Browning of Macomb, secretary and treasurer.

**Local Ohio Osteopaths Plan Organization.**—Local osteopaths, together with those of surrounding towns met for the purpose of effecting an organization on Jan. 18th, at the office of Dr. E. H. Cosner in the Reibold building for the discussion of the advisability of forming a permanent local organization. No such a body has hitherto existed in Dayton. Osteopaths here have previously attended the district meetings in Cincinnati.

**Meeting of Los Angeles County Osteopathic Society.**—The regular meeting of the Los Angeles County Osteopathic Society was held in Blanchard Hall January 15th.

Resolutions respecting the "Canal Zone Order" were ordered drawn up as well as other business transacted. Dr. R. D. Emery followed with the subject "The Heart in Relation to Blood Pressure."

Dr. Jenette Hubbard Bolles of Denver was with us and favored us with a good talk on the betterment of osteopathy and gave us a few points on interesting programs.—Dr. L. LUDLOW HAIGHT, 506 Mason Bldg., President.

**Large Attendance at Meeting of New York City Osteopathic Association.**—The regular meeting of the Osteopathic Society of the City of New York was held at the Astor House, January 20th, eighty-six members and visiting associates being present. The program, a symposium on "Our Failures," consisted of papers by Dr. A. S. Bean, of Brooklyn, Dr. J. A. West, of New York, Dr. Mary N. White, of Brooklyn, Dr. G. W. Burns, of New York, Dr. Alice M. Spence, of New York, and Dr. G. H. Merkley, of New York. Each member reported on one or more cases which had come under observation and ascribed reasons why, in his or her opinion, the conditions did not result satisfactorily. The spirit of mutual helpfulness was carried out by a full discussion following the papers.

Dr. Charles C. Teall, of Fulton, New York,—the guest for the meeting,—contributed an excellent paper on "The Causes of Failure in Treatment." Among the topics elaborated upon in his paper were errors in diagnosis and treatment; lack of correlative knowledge involving osteopathy, diet, hygiene, sanitation, environment, etc.; overlooking heredity, constitution, and predisposing forces; and lack of persistence on the part of the patient.

The meeting was considered by many to be one of the most helpful and successful in the history of the local Society.—Dr. N. D. MATTISON, 106 Central Park, West, N. Y., President.

**Ohio Osteopathic Society.**—A meeting of the fourteenth annual meeting of the Ohio Osteopathic Society was held in the Chittenden hotel in Columbus, Ohio, on Wednesday and Thursday, December 13 and 14, 1911. The program carried out was as follows:

WEDNESDAY, DECEMBER 13.—9:00 A. M. Reception—"Come and get acquainted." 10:00 A. M. Call to order, President; Invocation; Minutes of last meeting, Secretary; Regular Business. 10:30 A. M. President's Address, Dr. E. R. Booth, Cincinnati. 11:00 A. M. Dilatation of Stomach—Diagnosis, X-Ray, etc., Dr. Hugh W. Conklin, Battle Creek, Mich. 2:00 P. M. Osteopathy and the Gastro-Intestinal tract, Dr. D. C. Westfall, Coschocton. 2:30 P. M. Spinal Curvature and Twisted Pelvis, Dr. Carolyn Sheldon, Beverly. 3:00 P. M. Treatment and diet in Dilatation of Stomach, Dr. Hugh W. Conklin, Battlecreek, Mich. 4:00 P. M. X-Ray diagnosis of gross bony lesions, Dr. F. M. Hulett, Columbus, X-Ray work by Dr. Chas. F. Bowen,

Columbus. 6:30 P. M. Informal dinner, Osteopaths and friends, Chittenden hotel. Short talk by the pioneer D. O's. of Ohio.

THURSDAY, DECEMBER 14.—9:00 A. M. Exophthalmic Goitre, Dr. A. Z. Prescott, Lorain. 10:00 A. M. "Lesions;" in all their phases, Dr. H. H. Fryette, Chicago, Illinois. 11:00 A. M. "Traumatism," Dr. Clara A. Davis, Bowling Green. 11:30 A. M. Chorea: Insomnia: Discussion. 2:00 P. M. Adjustment of Lesions—Demonstrations, Dr. H. H. Fryette, Chicago. 3:30 P. M. (a) Imperative Surgery. (b) Why I Practice Osteopathy. Dr. A. W. Cloud, Canton. 4:00 The Successful Conduct of a Practice, Dr. G. W. Bumpus, East Liverpool.

The following officers were elected: President, Dr. Z. C. Sorensen, Toledo; Vice-President, Dr. A. Z. Prescott, Lorain; Secretary, Dr. E. H. Cosner, Dayton; Treasurer, Dr. G. W. Bumpus, E. Liverpool; Executive Committee, Dr. J. H. Scott, Columbus; Dr. B. H. Becker, Toledo; Dr. D. H. Reese, Akron; Dr. L. A. Bumstead, Delaware. State Osteopathic Examining Committee, Dr. F. M. Hulett, Columbus; Dr. E. R. Booth, Cincinnati; Dr. J. H. Bumpus, Steubenville.

**Colorado Osteopaths Meet.**—The fourteenth annual meeting of the State Osteopathic Association of Colorado was held in the offices of the president, Dr. George H. Perrin, on January 16 and 17. Doctors from all over the state were present. Dr. G. H. Perrin was re-elected president. Other officers elected were: Dr. U. S. Bowersox of Longmont, vice-president; Dr. Clara S. Richards of Denver, second vice president; Dr. J. A. Stewart, secretary, and Dr. F. A. Luedecke, treasurer.

The association passed a resolution advocating the establishment of a board of osteopathic examiners independent of the state board of medical examiners to examine persons who wish to practice as osteopaths.

**Toronto Osteopaths Organized.**—The osteopaths of Toronto, Ont., met at Dr. Bach's office on Saturday evening, January 27th, 1912, and organized the Toronto Osteopathic Association, a local organization for mutual improvement and scientific advancement.

Dr. Henderson was temporary chairman and the following officers were elected: President, H. C. Jaquith; Vice-President, Adalyn K. Pigott; Secretary-Treasurer, Frederic Schilling.

Dr. Fred C. Lincoln of Buffalo, N. Y., read an interesting paper on "Cancer" and later answered many questions.

Dr. Detwiler of London, Ont., read a paper "The rule of the Artery is Supreme," which was much appreciated.

The next meeting will be held February 24th in the offices of Dr. Janet M. Kerr, 24 La Plaza, Cor. of Charles and Jarvis Streets.—FREDERIC SCHILLING, D. O. Secretary.

**Osteopathic Society Challenged to a Debate.**—Dr. S. S. Still and Dr. George Moore osteopathic physicians of Des Moines, have challenged the entire membership of the Osteopathic Society of the Seventh district of Iowa to a public debate on the subject of the effectiveness of the present state medical law.

Dr. Still and Dr. Moore, who stand as the defenders of the law as it exists, will have almost the entire membership of the Seventh district society as opponents in this debate, which is to be held during the semi-annual meeting of the society to be held in Des Moines soon.

The Iowa Osteopathic Association and the district society have fought continuously for five years for the creation by the legislature of a separate state medical

board. The bill providing for the separate board has repeatedly met defeat. The proposed law had its opponents among the members of the osteopathic profession but in former years these have taken no active part to have the law defeated.

The announcement made public yesterday that Dr. Still and Dr. Moore intended to defend the actions of the state medical board of Iowa, which has been continuously accused of unfairness by members of the osteopathic profession, caused considerable consternation.

**Missouri and Kansas Osteopaths Meet.**—S. W. Missouri and S. E. Kansas Osteopathic Association met at the Joplin Y. M. C. A. on January 27th. The subject for discussion was "The Lungs." Dr. L. D. Gass gave a full, anatomical description of the lungs as well as the physiology, after which the pathology was discussed by various members and case reports with physical signs and treatment for the disease, being discussed, filled the rest of the program profitably. The next meeting is on February 24 at Joplin and we would like a big meeting as there are some committees to be appointed, looking to the election of officers and annual banquet in March.—Martha S. Cox, D. O. Sec.

## Health Hints

Having consulted William Muldoon, Eugene Sandow, Dr. Woods Hutchinson, J. Pierpont Morgan, Mayor Gaynor, Dr. William Robinson, Upton Sinclair, and many other well-known authorities on health, we are enabled to present the following rules, these being the latest consensus of opinion:

Eat nothing.

Eat everything you want.

Walk at least ten miles a day.

Do not stir unless you ride in a carriage or some other vehicle.

Don't worry.

It is absolutely necessary that you study yourself.

Remember, you are an animal.

Chew food until nothing remains.

Bolt everything. Only in this way will your stomach keep strong.

Never go on a vacation.

Change is absolutely necessary.

Eschew alcohol and tobacco.

Smoke all you want to. Drink everything.

Keep cool.

Prespire profusely.—Life.

## Legal and Legislative

**National Bureau of Health For Ontario.**—According to newspaper reports there is considerable political activity among the doctors in Ontario. It is understood that Hon. W. J. Hanna and Dr. J. W. S. McCullough, chief medical officer for the province, are now preparing a bill, with the assistance of the law clerks, to be presented to the legislature early in the session, providing for the dividing of the province into about a dozen districts, with a doctor in charge of all sanitary and health work in each district. The decision to take this action was reached some time ago, and the health act now is being revised and amended.

The proposition is to place a doctor in complete charge of all medical health work in each district. These districts, however, have not yet been decided upon, nor will they be for some time. The doctors will submit weekly reports to the chief medical officer, who thus will be in closer touch with the entire province, and as the reports also will be submitted to the local boards of health, it is possible that the provincial board will be abolished. Each doctor will have supreme power in his district, and anything he orders in the way of better sanitary conveniences, cleaning up of towns and districts, pollution of streams, etc. must be carried out. The salary to be paid the doctors has not been decided upon, but it is probable that it will be about \$2,000 a year each. Already several applications for the positions have been sent in to the government, but just at present the whole thing is "in the air," and nothing definite will be known until the new health act is presented for the consideration of the house.

So far as may be determined the purpose of this new Health Act is similar to the proposed Owen Bill to establish a National Bureau of Health in the United States and the move should be opposed to the last ditch by the Ontario osteopaths. It is a significant coincidence that identical national legislation in this direction should be attempted in the United States and Canada. Ontario osteopaths are likely "on the job" and with the precedent of the recent victory in the Alberta provincial legislature it is hoped that the new health act may not only be defeated,—unless absolutely fair to all schools of healing, especially osteopathic,—but that osteopaths will be able to have enacted a law, similar to that in Alberta, compelling recognition of and placing them upon equal footing with the allopaths.

**The Situation in Alberta.**—In regard to the recent great victory in Alberta, the following details may be of interest. The battle was begun on Wednesday the 13th of December.

In support of the amendment to the Medical Act, which provided for the regulation of the practice of osteopathy in the province by the Alberta Medical Council, the committee was addressed at considerable length by Dr. R. G. Brett, of Banff, chairman of the legislative committee of the Alberta Medical Council, who stated that he did not wish to be understood as saying that osteopaths did not do good work. The measure proposed by the Medical Council was not that they should be prevented from practicing their profession in the province, but that the public should be guaranteed that when they went to an osteopath, homeopath, or allopath for treatment they would get good treatment. The medical men wished to place the pro-

fession of osteopathy on the same plane as their own. When osteopaths had passed the proposed examination the medical men of the province would then welcome them as specialists in osteopathy. The general medical practitioner could then refer cases to them, as they were accustomed to referring cases to other specialists.

Dr. Brett protested against the idea that the motive of the medical profession in wishing to control the practice of osteopathy was to keep their profession a close corporation. As proof of the contrary spirit he stated that Canada was on the eve of a medical reciprocity act, which would throw open all the provinces of the Dominion to men who had passed the examination of a Dominion Medical Council.

Dr. Sage, representing the osteopaths, introduced himself to the committee as a man who has graduated in Medicine in 1888 and had for eighteen years practiced medicine in Detroit before becoming converted to the osteopathic view of the art of healing. He was now convinced that osteopathy could cure all diseases, acute or chronic, and would succeed in 60 per cent of the cases where medicine failed. The present board of medical men, he declared, were not fitted to examine osteopaths, because, in the first instance, they were prejudiced against them, and in the second, knew nothing of the technique and practice of osteopathy. Probably not one medical man in Alberta had ever been inside a college of osteopathy.

That the medical system of healing and the osteopathic system were based on theories diametrically opposed to each other was the statement made by Dr. Sage. In view of this fact, he declared, the men practicing one of the professions could not respect the theories of the other profession and consequently it was impossible for them to work in harmony.

A composite board of examiners, Dr. Sage declared, was an absurdity. It was as unreasonable to appoint medical men and osteopaths to one board as to appoint professors of different religions to one examining board.

A further objection to the passing of the amendment to the Act advanced by Dr. Sage was that osteopaths now practicing in the province would be compelled to undergo re-examination.

Dr. Ghostley, a graduate of the Los Angeles School of Osteopathy, took objection to the bill on the ground that it provided many restrictions with but few privileges. He maintained that the object of the bill was purely and simply to give the control of the profession of osteopathy into the hands of the medical men. The osteopaths had no fight with the medical men. They had their profession and desired to be allowed to practice it.

Dr. Campbell offered the explanation that if osteopaths passed the same examination as the medical men they would have precisely the same privileges.

Dr. Ghostley replied by declaring that the stand of the medical men and of the osteopaths differed so materially that there was no possibility of their ever getting together and reaching an understanding.

On the following day the further discussion of the relations of osteopathy and the medical profession was continued for two hours by the special committee of the Legislature appointed to examine the amendment to the Medical Profession Act, proposed by Dr. Campbell. The committee was again addressed by Dr. Brett, and also by Dr. Lafferty, of Calgary, on behalf of the medical profession, and by Dr. R. C. Ghostley on behalf of the osteopaths. A good deal of further evidence was placed before the committee, and shortly after twelve o'clock, it being evident that the committee could come to no conclusion, it was decided that progress should be

reported to the House without recommendation and the question left to the committee of the whole House for decision.

In order that the provisions of the amendment to the Medical Act might be discussed with regard to the bill for an Act respecting osteopathy, which J. W. Woolf has introduced in the House, typewritten copies of the bill were provided for the members of the committee.

The bill for the independent board, for which the osteopath had refused all offers of compromise from the medics was passed the following week and we print it in full:

Whereas the persons hereinafter named have by their petition prayed that an Act may be passed incorporating them under the name of "The Alberta Association of Osteopaths," and whereas it is expedient to grant the prayer of the said petition:

Therefore His Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Alberta, enacts as follows:

INCORPORATION.—(1). That N. L. Sage, R. C. Ghostly, W. H. Albright, C. V. McNeal, M. E. Church, E. D. Plummer, H. E. Walker, L. B. Mason, and S. B. Detwiler, qualified practising resident Osteopaths and all other persons who may from time to time be admitted to membership of the Corporation, are hereby constituted a body politic and corporate by the name of "The Alberta Association of Osteopaths," hereinafter called "The Association."

CORPORATE NAME.—(2). The objects and powers of the Association shall be to promote and increase by all lawful means the knowledge, skill, and proficiency of its members in all things relating to the science and practice of osteopathy, and to that end to establish classes, lectures, and examinations, and prescribe such tests of competency, fitness and moral character as may be thought expedient to qualify for admission to membership.

Any person residing within the Province of Alberta at the date of the passing of this Act who is a practicing Osteopath and a graduate or licentiate of any recognized College of Osteopathy in Canada or in the United States, shall be entitled to become a member of the Association upon making application to the Secretary thereof within three months of the date of the passing of this Act.

HEAD OFFICE.—(3). The Head office of the Association shall be in the Province of Alberta at the office of the Secretary for the time being, or until such time as the Association shall in general meeting decide upon the permanent location of the head office.

ANNUAL MEETING.—(4). An annual meeting shall be held for the election of the council of the Association and for such other business as may be brought before such meeting, at such time and place, and under such regulations and notices as by the by-laws of the Institute shall be determined; and in default of such election being held at the proper time, the existing council shall continue to act until successors shall be duly appointed.

BUSINESS AFFAIRS.—(5). The affairs of business of the Association shall be managed by a council consisting of not less than four and not more than fifteen members, to be constituted in such manner as hereinafter provided, and the following persons shall constitute the first council.

NOMINATION OF COUNCIL.—(a). Nomination of candidates for election to council must be in writing signed by two members of the Association and must be lodged with the Secretary at least fourteen days before the date of the annual meeting.

VOTING.—(b). A voting paper containing the names alphabetically arranged, of the persons nominated for election to the council, shall be sent by mail to each

member in good standing at least ten days before the date of the annual meeting, and the council shall be elected by means of such voting papers, whether the members voting be present at or absent from the annual meeting.

VACANCIES.—(c). All vacancies which may occur in the council by death or otherwise, in the interval between two annual meetings, may be filled by the council.

OFFICES.—(6). The council shall elect from among its number a president, two vice-presidents, a secretary and a treasurer (the same person being eligible for both the last mentioned offices), and such other officers as may be provided by the by-laws.

BY-LAWS OF COUNCIL.—(7). The objects and powers of the Association shall be carried out and exercised under by-laws and resolutions passed by the council, but every such by-law, unless in the meantime confirmed at a general meeting of the council called for the purpose of considering same, shall have force only until the next annual meeting, and in default of confirmation thereat, shall cease to have force; provided always, that any by-law passed by the council may be repealed, amended, varied or otherwise dealt with by the council at any annual meeting or at a special meeting called for the purpose.

(a). All by-laws and resolutions passed by the council or by the Association, at an annual meeting, shall be subject to revision by the Lieutenant Governor in Council.

EXAMINATION.—(8). The Council shall have authority from time to time to prescribe a curriculum of studies to be pursued by the students, to determine the fitness and moral character of persons applying to be examined, to prescribe the subjects upon which candidates for certificates of competency shall be examined, to fix standards of skill and competency, to establish a scale of fees to be paid by persons applying for examination, to appoint examiners define their duties and fix their remuneration, and to make such rules and regulations (not contrary to the provisions of this Act or the by-laws of the Council) in respect to examinations as may be expedient.

EQUIVALENT EXAMINATIONS.—(9). The council shall prescribe the conditions upon which persons who have passed the examinations of other corporate bodies having the same or similar objects may be admitted as members of the council and these conditions shall be reasonable and subject to amendment from time to time and to change by order of the Lieutenant Governor in Council.

LECTURES AND CLASSES.—(10). The Association may establish lectures and classes of students in anatomy, physiology and chemistry, and in such other subjects as the Council may from time to time approve, and may, subject to the approval of the Lieutenant Governor in Council, make arrangements with any University or College in Alberta for the attendance of students at such lectures or classes in any such University or College as may come within the course of subjects prescribed by the rules, by-laws and regulations of the Council, and may, subject as aforesaid, agree with any such University or College for the use of any library or museum or property belonging to or under the control of such University or College, and may affiliate with any such University or College, and may enter into all arrangements necessary for such end, upon such terms as may be agreed upon.

TARIFF OF CHARGES.—(11). The Council may adopt a tariff of fees which may be demanded by members of the Council and may amend the same, and upon the approval thereof by a two-thirds majority of the members, the Lieutenant Governor in Council may direct that the said tariff shall be recoverable in law by a member of the Council in any court of competent jurisdiction.

“while the paramount servicability of a remedy is its therapeutic value, its adaptability is an item of no small import.

This is particularly true in the application of hot moist heat, the generally accepted treatment for inflammatory conditions, where its continued application is so essential for results.

To subject a patient to frequent and unnecessary dressings and exposure, as is the case where poultices, moist packs, etc., are used, not only retards the progress of treatment, but disturbs and annoys the patient and is not in keeping with advanced therapeutics.

The serviceability of antiphlogistine as a therapeutic agent is best attested by the preference accorded it by the medical profession in the treatment of congested or inflammatory conditions where hot moist heat is called for.

The adaptability of antiphlogistine indicates it as the best medium for the employment of hot moist heat as it is easy to apply, holds its heat for hours and thus does not disturb or annoy the patient.”

**LISTERINE** is a powerful, non-toxic antiseptic. It is a saturated solution of boric acid, reinforced by the antiseptic properties of ozoniferous oils. It is unirritating, even when applied to the most delicate tissue. It does not coagulate serous albumen. It is particularly useful in the treatment of abnormal conditions of the mucosa, and admirably suited for a wash, gargle or douche in catarrhal conditions of the nose and throat.

There is no possibility of poisonous effect through the absorption of Listerine.

**Listerine Dermatic Soap** is a bland, unirritating and remarkably efficient soap.

The important function which the skin performs in the maintenance of the personal health may easily be impaired by the use of an impure soap, or by one containing insoluble matter which tends to close the pores of the skin, and thus defeats the object of the emunctories; indeed, skin diseases may be induced, and existing disease greatly aggravated by the use of an impure or irritating soap. When it is to be used in cleansing a cutaneous surface affected by disease, it is doubly important that a pure soap be selected, hence Listerine Dermatic Soap will prove an effective adjuvant in the general treatment prescribed for the relief of various cutaneous diseases.

“The Inhibitory Action of Listerine,” a 128-page pamphlet descriptive of the antiseptic, and indicating its utility in medical, surgical and dental practice, may be had upon application to the manufacturers, Lambert Pharmacal Co., Saint Louis, Missouri, but the best advertisement of Listerine is . . . . .

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**POWER TO HOLD AND DISPOSE OF PROPERTY**—(12) The Council may take, purchase and hold any personal property, lands, buildings and hereditaments, for the purpose of the association and may dispose thereof, but so that the Council shall apply all its profits, if any, or other income in promoting its objects, and shall not at any time pay any dividend to its members. The provisions of this section shall not prevent the remuneration of members of the Council or officers of the Council for services rendered, out of any surplus remaining, after the ordinary expenses of the Council have been met.

**MEMBERSHIP**—(13) All persons admitted to membership in the Association shall have the right during the time that such persons shall continue to be members of the Association, to use the designation "Doctor of Osteopathy," and may use after his name the initial "D. O."

**HONORARY MEMBERSHIP**—(14) Persons who shall have rendered conspicuous services to the Council either in the advancement of its educational objects or its general welfare, or by material contribution to the library or other funds of the Association may by unanimous vote of the members present at any meeting of the members be elected to honorary membership of the Association.

Honorary Membership shall not confer upon any person elected thereto the right to use the designation "Doctor of Osteopathy"

**PENALTIES**—(15) No person shall be entitled to take or use the designation of "Doctor of Osteopathy" or the initials "D. O." either alone or in combination with other words, or any name, titles, description, or designation, implying that such person is a practicing osteopath, or imply that such person is qualified to practice Osteopathy, unless he is a member of the Association in good standing and registered as such. Any person using name, title, initials, description or designation contrary to the provision of this section shall be liable on summary conviction to a fine not exceeding \$125.00 for each offense.

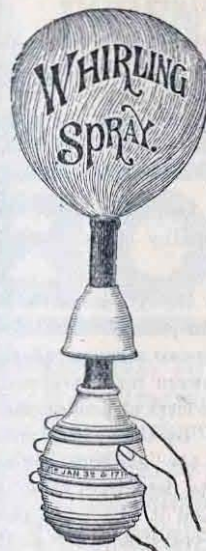
(a) The Council may institute proceedings under this ordinance for any breach of the provisions of this section in such District Court in the Province under which jurisdiction of which the breach shall have been committed.

In any proceedings brought by the Council under amending ordinance burden of proof as to enrollment and qualification under this ordinance, shall be upon the person accused.

**EXPULSION OF MEMBERS**—(16) Any member of the Association who has been convicted of a felony may be struck off the roll of members or suspended from practice by resolution of the Council. The Association may by law provide for the suspension or expulsion of any of its members on complaint and after proof made against such member in an inquiry at which the accused member shall have the right to be heard or to be represented by Counsel for any misconduct or for violation of the rules or by-laws of the Association, but all such by-laws shall be subject to revision by the Lieutenant Governor in Council.

**MEMBERSHIP REGISTER**—(17) The Council shall cause to be kept by the Secretary or other officers a book or register, in which shall be entered in alphabetical order the names of all members in good standing; and the members only whose names are inscribed in the book or register aforesaid shall be deemed entitled to the privilege of membership in the Association; and such book or register shall at all times be subject to inspection by any person free of charge.

(a). Such register, or a copy of the same duly certified by the Secretary or Registrar, shall be prima facie evidence in all courts and before all persons, that the per-



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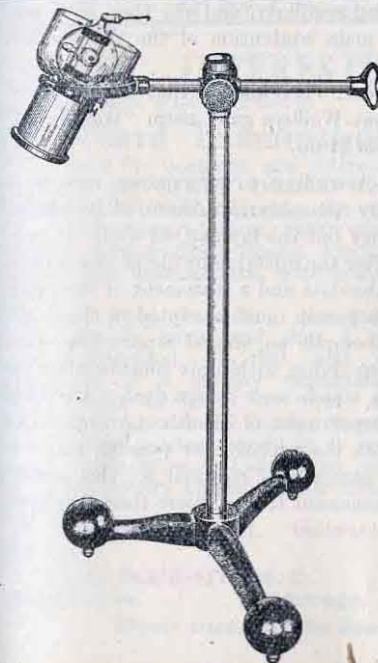
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sions therein specified are members of the Association in good standing, and the absence of the name of any person from such book shall be prima facie evidence that such person is not a member of the Association.

(18). Nothing in this Act shall be constituted to affect or interfere with the rights of any person practicing in the provinces of Alberta under the authority of "The Medical Profession Ordinance."

**Vermont State Board to Examine Applicants.**—The next meeting of the Vermont State Board to examine applicants to practice osteopathy in the state is set for March 13 and 14 in Rutland.—L. D. MARTIN, Secretary.

**Osteopaths Cause Warrants to be Issued.**—Backed by the American Osteopathic Association, local osteopaths of Rochester, N. Y., went to police headquarters a few days ago and caused the issuing of warrants for two persons who are alleged to be illegally practicing medicine in this city. The arrests were made yesterday afternoon. Among the affidavits on file in the office of the police clerk at headquarters are several signed by women who claim to have been "treated" by the accused men.

Sometime ago local osteopaths began an investigation of the methods alleged to be indulged in by certain practitioners in the city. Private detectives attached to the Hayden Agency were employed to obtain evidence, and it was upon their reports that warrants were issued for Homer L. Pellette, 33 years old, of No. 313 Mercantile building, and Hans L. Weilbye, 36 years old, of No. 276 Monroe Avenue. Both men were taken into custody yesterday afternoon by Special Officers Shayne and John A. Doyle, of the Franklin Street Station. They gave bail for their appearance in police court tomorrow morning.

The two men are accused of having failed to register and not being authorized to practice medicine in the state, which is a violation of section 174 of the public health laws. Both claim to have been graduated regularly, and say they have not knowingly violated any of the statutes. The main contention of the Osteopathic Association people is that neither has a license.

Dr. Weilbye is said to be a medical masseur. It is alleged that woman have sworn or statements in which they declared that Weilbye gave them "treatment" and a bottle of medicine for which he charged from \$1 up.

**Proposed Bill Concerning Vaccines.**—According to newspaper reports a bill has just been introduced in the Legislature by Assemblyman Ahern, of Brooklyn, which will interest not only the medical fraternity but the layman, as well. It provides that if any person die within six months after the injection or use of any serum, antitoxin or vaccine the fact of such injection, the date and a statement of the probable or improbable relation to the death of such person must be stated in the death certificate. Every local board of health shall compile an annual report from such death certificates of the total number of persons dying within six months after inoculation, and the nature of the disease from which such person died. A copy of such statement shall be filed with the State Department of Health. An attending physician who wilfully conceals or misrepresents the probable or possible cause of death by omitting from death certificate the statements required by this section shall be guilty of a felony, punishable by imprisonment for not more than two years or by a fine of not more than \$1,000 or both.

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**State Board of Health Being Investigated.**—Under the right given him by a resolution adopted by the House on January 16, Representative L. B. Herrington, of Madison County intended to probe into the affairs of the Kentucky State Board of Health with a view to ascertaining just how the \$30,000 placed at its disposal by the last Legislature had been expended. The inquiry was to begin on January 24th, when Dr. J. N. McCormack and other members of the board were to appear before the House Committee on Kentucky Statutes for the purpose of airing their views on the bill offered by Mr. Herrington recently giving to the Governor the right to appoint members of the State Board of Health with dictation from any source. On that occasion Mr. Herrington, as a member of a standing committee of the House, and author of the bill in question, intended to place Dr. McCormack and others under oath and require them to answer any question he might ask bearing on his measure.

Under the present law the different medical societies dictate the appointments, or, are supposed to, as the law invests them with the power. These societies have become powerful political machines. Especially is this true with the State Medical Society, and Dr. McCormack seems to be the absolute dictator thereof. This organization can dictate to the Governor a majority of the members of the State Board of Health and perpetuate them in power.

The State Board of Health fills a number of very important offices and spends \$30,000 annually of the people's money. The Board appoints the State Sanitary inspector, State Bacteriologist, Assistant Bacteriologist, State Registrar of Vital Statistics, secretary and assistant secretary, all of whom draw salaries ranging from \$1,200 to \$2,500 per annum. The board should be taken out of politics, and the old machines broken up. I believe the best way to do this is to give the Governor the absolute power to appoint members of the board, as is the case in other progressive states.

**Dr. J. N. McCormack Retires from American Medical Association.**—Dr. J. N. McCormack, of Bowling Green, has resigned from the position of chairman of the Committee of Organization of the American Medical Association. He has occupied the position for eleven years. His resignation was due to a desire to devote his entire time to the affairs of the State Board of Health, of which he had been secretary for the past thirty years. The work of the State Board of Health has been materially increased by the appropriation made by the last Legislature of \$30,000 against previous appropriations of \$35,000.

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## Personals

**Spends Day in Kirksville.**—Dr. O. C. Keller of Grand Forks, N. D., was in Kirksville January 19th. This was Dr. Keller's first visit to Kirksville since his graduation on 1906.

**Good Openings for Osteopaths.**—We have been informed of the following good openings for osteopaths—Hilton, Kansas, for further information write to Grace C. Manynard. Salida, Colo., write to E. E. Davis, Sanducky Bldg. Dr. F. A. Parker writes that Springfield, Tenn. is a good place for an osteopath, but that he is going to leave soon for a Kentucky location.

**Gave Expert Testimony.**—Dr. W. S. Corbin of Chickasha, Okla., recently testified as an expert witness in certain life insurance cases, among other physicians and surgeons, some of whom are considered at the head of their profession in the state of Oklahoma.

**Killed in Street Car Accident.**—Mrs. Henry Springmire, mother of Dr. Fannie Springmire Parks, Macon, Mo., was killed in a street car accident in Iowa City, Ia., December 21st.

**Speaks at Parent-Teacher's Association.**—Dr. Jeanette Bolles, Denver, Colo., chairman of the child hygiene committee of Denver, was one of the speakers and conducted a question box on child hygiene at the Parent-Teachers' association February 1st. Dr. Bolles was the guest of honor at a luncheon given recently by the board of directors of the California Congress of Mothers.

**Passed State Board Examination.**—Dr. F. A. Parker of Springfield, Tenn., recently passed the Kentucky State Board examination. Thirty-two took the examination—thirty M. D's. and two D. O's.—of these all passed except ten of the M. D's.

**Takes Post Graduate Work.**—Dr. E. W. Forsee, Brookings, S. D., is taking a post graduate course at the A. S. O. at Kirksville. His family will visit relatives in Missouri for several months.

**American Soprano Makes Debut in London Opera House.**—Miss Felicia Lyne, the young American soprano, who was the recipient of a tremendous ovation upon her debut in the London Opera House a short time ago as Gilda in "Rigoletto" was born in Kansas City twenty years ago. The prediction has been made that she will be the Patti or Melba of the operatic world. Her father, Dr. Lyne; her grandmother, Dr. Theodosia E. Purdom; her aunt, Dr. Zudie Purdom; and uncle and aunt, Dr. and Mrs. F. E. Moore are all osteopaths.

**An Error.**—In the January issue of the Journal the address of Dr. Pauline Sears should have been given Ontario, Ore., instead of Ontario, Canada.

**Sells Practice.**—Dr. F. C. Hill, of Homer, Ill., has sold his practice to Dr. L. A. McMasters, a prominent osteopathic doctor of Danville, Ill. Dr. Hill has removed to Champaign, Ill.

**Osteopath Dies.**—Dr. W. E. Noonan recently died at his home in Houston, Texas. He had practiced in Houston the last six years and had a very large practice. Dr. Noonan, his wife, will continue the practice in the same office.

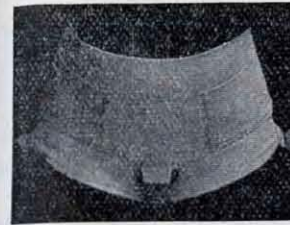
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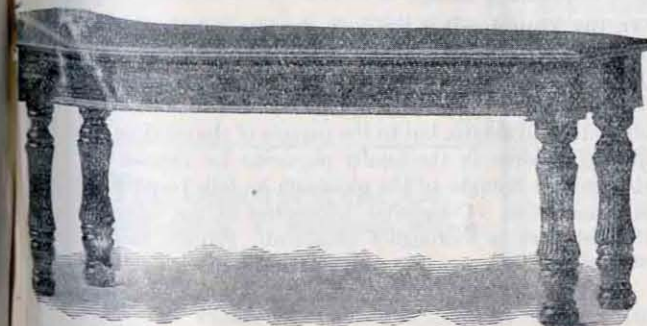
of the OSTEOPATHIC JOURNAL, the Journal for the laity, containing the articles on osteopathy by Dr. Bryce and Dr. Whitehead, the two famous English Physicians.

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**Died at Temple, Texas.**—Miss Mae Speegle, oldest daughter of Dr. and Mrs. A. A. Speegle, died in the sanitarium at Temple, Texas, January 27th.

This bright young girl was holding a position in a bank at Navasota when taken ill. Her friends of the bank started with her to a sanitarium in Temple but it was too late and she died shortly after arriving there.

Dr. Speegle and wife were telegraphed for and started to reach her, but a delayed train caused them to miss connection and at Milano they were met with the intelligence of her death.

The friends who had accompanied her from Navasota to Temple had the remains prepared and met the stricken parents at Milano and all returned to their home in Palestine, Texas, together.

**Prevalent Diseases.**—Each change of Season brings with it the diseases seemingly peculiar to the time.

Summer brings its Intestinal Disorders, Sunburn, Insect bites, Ivy poisoning, etc. Fall presents for the attention of the physician, its Typhoid cases and Winter and early Spring, its regular quota of Pneumonic, Bronchial, Throat and other chest conditions.

At this Season, when Pneumonia and Bronchitis demand the call of the physician, literature presenting the experience of fellow practitioners, in the successful handling of these cases, would seem most apropos.

The Bloodless Phlebotomist for January reflects the experience of many physicians upon this timely subject.

Dr. Charles Buck of Cincinnati presents his experience in handling cases of Pneumonia, also relates some facts in the treatment of Lumbago, which might also be considered as an affliction prominently manifesting itself at this Season.

"Broncho-Pneumonia" with supportive as well as local treatment in all its details, is the subject of the paper of F. A. Kautz, also of Cincinnati.

Dr. E. Clinton Murray, of Houston, Texas, relates his experience and treatment in a case of Pneumonia in an eighteen months old baby, and Dr. J. C. Klippinger, of Independence, Kansas, presents a "Different Technique in Pneumonia," which is decidedly original. In abstract his method is to apply the local dressing in a manner which gives the intercostal muscles a chance to functionate without restriction from bandages. This symposium is closed with a paper from Dr. W. A. Radue, of Union Hill, N. J., upon "Acute Pleurisy and a Successful Abortive Treatment."

Besides the papers referred to, upon the subject of Chest and Throat diseases, much additional information is given. The one in particular we would have you note is the "Rational Influence of Hot Application" by that well-known Therapeutist, Dr. Finley Ellingwood, of Chicago, Illinois.

A postal card addressed to the Bloodless Phlebotomist, No. 57 Laight Street, New York, will bring you a copy of the January issue.

**Prevention of Deformity in the Young.**—It is the duty of every Osteopathic Physician to watch over the progress, growth and development of the young in families under his care. The fact that proper examination is not made permits the development of a serious spinal deformity becoming outwardly apparent. The fault in our opinion is chargeable, not only to the physicians, but to the parents of the children who neglect to present their growing children to the family physician for examination. Often, however, when children are brought to the physician he fails to strip the child and make a thorough examination. Congenital deformities of the spine cannot be detected unless the naked back is thoroughly examined. Prompt and

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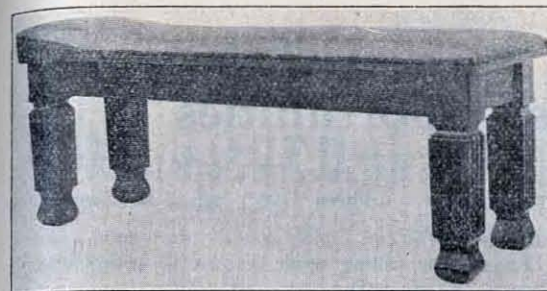
proper treatment of congenital lateral curvature depends on early diagnosis. Such curvatures are also produced by a faulty manner of carrying the infant by the nurse or mother. The use of the small uncomfortable carriage or perambulator. These carriages are often too short for the child. Pillows are used to bolster up the shoulders, a forward bend of the spine is produced and the abdomen and contents pressed downward causing Enteroptosis. The results of this condition and also through pressure on the important nerve roots emerging from the spine and supplying the different organs of the body, gives rise to many other pathological conditions so commonly found in the young. The importance of watchful care of children by parents, school teachers and physicians cannot be overestimated.

An authority on spinal deformity, advises the use of the Spinal Appliances made at Jamestown, N. Y., by the Philo Burt Manufacturing Company, in all cases of weak or deflected spine, and suggests to all Osteopaths the importance of proper support and special exercise and the advising of parents of their duty in consulting the family physician in regard to the physical condition of children at least twice a year. Physicians should instruct teachers to see that the desks and chairs of their pupils fit the individual, as a desk too high or too low is a fruitful source of lateral curvature in the growing child. The eyes should be tested occasionally as astigmatism causes the child to tilt the head in writing or reading, thus producing deformity. No satisfactory progress in study can be expected if the student is suffering physically, and teachers should be educated in all sanitary and preventive measures necessary to recognize unsanitary conditions and incipient physical deformities to the end that those under their care be mentally and physically benefited by their instruction.

**Think it Over.**—Read the advertisement on page 131 of this Journal, of the Marvel Co., New York, and then sit down, when you feel in the mood, and draw upon your experience with the "Therapeutic Value of the Vaginal Douche." You may win a prize. If not, you will have aided your other physicians by giving them the value of your knowledge and opinions.

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## Born

To Drs. Arthur E. and Nina Wilson Dewey, Des Moines, Ia., January 17th, a son, Arthur Wilson Dewey.

To Dr. and Mrs. J. H. Wilkens, McMinnville, Ore., January 7th, an eleven pound girl.

To Drs. E. G. and Edyth Carel at Cape Girardeau, Mo., on Feb. 2nd, a daughter.

## Died

Dr. W. E. Noonan, at Houston, Texas.

Dr. W. E. Chalstran, at Galesburg, Ill., January 28th.

Mrs. Henry Springmire, mother of Dr. Fannie Springmire Parks, at Iowa City, Ia., December 21st.

Miss Mae Speegle, at Temple, Texas, January 27th.