

Osteopathic Truth

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Osteopathic Truth



A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

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

Volume III

SEPTEMBER, 1918

Number 2

The Old Doctor's Mantle

A. G. Walmsley, D. O., Peterborough, Ont.

UPON whom will the Old Doctor's mantle fall? was a question that occurred to many when the sad news of his passing became known. And with kaleidoscopic rapidity the first thought was followed by another, to the effect that no one could take the place of the Old Doctor, and that it was almost irreverent to even think of such a thing. However, with the lapse of time and calm reflection new thoughts have come to us.

In order to properly appreciate our relationship to the life work of the Old Doctor—and thereby get a broader conception of our own work and mission—we must indulge in retrospect, and we must also ask certain questions, which are:

First. What lead to the discovery and development of osteopathy?

Second. What did the Old Doctor consider to be his mission during the developmental period of the science of osteopathy, say from 1874 to 1892?

Third. What did the Old Doctor deem his mission after 1892? Had his mission in any sense changed?

The above questions may strike some as exceedingly commonplace, as platitudinous, but they are germane to our subject and if properly answered should give us a broader vision of our profession and of our place in it. We will endeavor to answer these questions.

First. The thing that lead to the discovery and development of osteopathy was the consummate failure of drug therapy. It was not merely the Old Doctor's failure to get results with drug treatment that discouraged him; his was an observant, an inquiring mind, and he was quick to see that his professional brethren were no more successful than himself. However, it took a professional and domestic cataclysm to finally break the bond that held the Old Doctor to the practice of medicine and to start him in the quest of a new therapeutic partner.

As my readers know, it was the loss of patients and of several members of his own family in an epidemic of cerebro-

spinal meningitis that finally broke the bond between the Old Doctor and drugs. He learned in sorrow that drugs were absolutely unreliable, and he resolved to devote himself to the discovery of a more rational, a more dependable way of treating diseased human bodies. Osteopathy was born of that resolve.

May we say in passing, that it strikes us that those who desire to mix drug therapy with osteopathy, those who long for the M. D. degree, utterly fail to grasp the significance and purport of the Old Doctor's early struggles and of the great work to which he devoted the best years of his life.

Second. What did the Old Doctor consider his mission during the developmental period of the science of osteopathy?

Briefly speaking, his mission was then as it had always been, namely, to relieve the sufferings of his fellow men. But it had assumed new features. It became his mission to demonstrate to the common people (his medical brethren, true to form, would have none of it) that the human body was a machine, a highly organized machine composed of many delicate parts, and that the body contained its own biological and chemical laboratories, and under proper conditions it manufactured its own agencies with which to combat disease; that when the body became diseased it was almost always due to some disturbance in the mechanism of the body which in turn impaired the working of the laboratories in their efforts to supply the needed defensive agencies. The Old Doctor further reasoned that the true physician was one who sought the cause of disease and removed it, thus permitting a return to normal functioning. He called the physician a body engineer whose duty it was to adjust the various parts of the body so the human machine would run smoothly, without friction; and conversely he reasoned that the drug way of treating diseased human bodies was unnatural, illogical.

This, however, does not fully sum up the mission of the Old Doctor at the time of which we are speaking. Not only did he set out to demonstrate to the people the truth of the new theory, but what was to him of infinitely more importance, he must needs demonstrate to himself, prove to his utmost satisfaction, the truth of the principles upon which osteopathy was founded and the dependability of osteopathy under any and all circumstances. This, as we know, was not accomplished hurriedly. It took nearly two decades of hard work, of constant application and research for the Old Doctor to *prove to himself* the dependability of the new therapy.

Every true follower of the Old Doctor must pass through some of the phases of evolution that he passed through. It is not sufficient to say to himself that the osteopathic concept is logical and scientific; that he believes osteopathy to be the rational method of treating diseased human bodies. He can only make osteopathy a part of himself by *proving to himself* that he can do what his mentors taught and what they did. Inasmuch as it takes years for each osteopath to do this, after he enters practice, is it not presumptuous for fledglings who have not yet *proved osteopathy* to say that osteopathy falls short, and that we need this and we need that to round it out and make it a complete system of therapeutics?

Third. What did the Old Doctor deem his mission after 1892? Had his mission in any sense changed?

In a sense, the Old Doctor's mission had changed; in another sense it had merely broadened.

Up to 1892, when the American school of Osteopathy was started, the Old Doctor had been in constant contact with the people as healer and as teacher. But his love for suffering humanity was such that his broadened vision beheld Osteopathy perpetuated. Osteopathy could be perpetuated in only one way, namely, by teaching it to others. In this way orig-

inated the parent school of Osteopathy, and with its inception the Old Doctor ceased to be a direct teacher of the people, but continued to teach them by proxy or through others. It became his desire, his great ambition to send out many competent healers and teachers, to surround himself with a band of ardent, enthusiastic and faithful co-workers. And to the Old Doctor's lasting praise we can truthfully say that he never in the least begrudged the laurels won by his pupils. Their successes but added to his great happiness.

The Old Doctor was essentially a teacher, a great teacher, and we believe it would please him more to be remembered as a teacher than as anything else.

Upon whom has his mantle as teacher fallen? It has not descended to any one individual in the profession, but rather has descended, has become the property of the entire profession. Oh, the privilege, the honor, the dignity that is ours!

If we will look back some forty years and think of the effort put forth by one lone man to teach the people a saner and surer way to health, and then contemplate the fact that there are thousands of us today among whom to divide the work that was started by this man, surely we must realize that our task is infinitesimal compared with his.

The Old Doctor's mantle, his mission as teacher of a rational system of therapeutics, has become the joint mission of the osteopathic profession. Ours is a great responsibility, and the very fact of this responsibility being divided as it is makes it, in some respects, greater than if actually borne by a few. It is only by unity of purpose and of effort, by cohesion, by constantly keeping in mind the principles upon which Osteopathy is founded that we can present a solid front and continue to make progress as teachers of better therapeutics.

As joint successors of the Old Doctor we are confronted with certain conditions that he did not have to contend with. In the Old Doctor's time he was ridiculed and persecuted in a petty way by the medical profession and by some of the laity as well. But this has changed. The medical profession, realizing the hold Osteopathy has upon the people, and realizing that no amount of ridicule and petty persecution can discredit Osteopathy and its practitioners, has, through the instrumentality of the American Medical Association, undertaken a carefully planned and well organized political campaign against us. It is like a giant octopus reaching out in all directions with its powerful tentacles, and woe to us as a profession if we allow ourselves, through division in our ranks, through

lack of appreciation of the basic principles of Osteopathy, through lack of loyalty to and support of our colleges, our State and National Societies, the periodicals and books issued by the profession, through lack of loyalty to our fellow practitioner, and through failure to discern the deep and underlying motives of the medical octopus, and thereby allow ourselves to become its ready victims.

Much as we appreciate the courtesies and liberal attitude of certain members of the medical profession toward some of us as individuals and toward us as a profession, let this not blind us to the fact that the political brain of the octopus sleeps not day nor night; it is ever on the job, and its one aim is to crush all opposition—and the Osteopathic profession is its only formidable opposition—and it is determined to do this by any means at its command. It is truly Prussian in its aims and in its methods of furthering those aims. Let us not be found sleeping on sentry-go, but rather, let us prove that we are true soldiers by our united efforts to carry on the great work entrusted to us by the beloved Old Doctor, and by ever being alert to dangers from within or without that threaten to wreck our mission as teachers of the people.

DR. MARION BURNS KILLED

Brother of Dr. Louisa Burns

Dr. Marion Burns, brother of Dr. Louisa Burns, was killed Friday, August 30th, in an aeroplane accident at the Mather Flying Field.

Dr. Burns enlisted some time ago and was serving as a cadet in the Aviation Corps.

We extend the sympathy of the profession to the family of Dr. Marion Burns, for although his life was given in the cause of Liberty and Freedom for all peoples we feel the loss to our profession of a man of promise.

Again, a man hath passed.

BUY
4th Liberty
Loan Bonds
and lick the Hun!

DR. KENDALL ACHORN DICTATES A BOOK

Remarkable Volume Soon to Issue
From New York Publishers as Being
Dictated From Dweller in
"The Life Eternal" to Dr.

Betsy Hicks of Bat-
Creek

"The Bugle" Reveille in the Life Beyond

"My mission," says the "author" in the statement credited to him, "is to write a story of my brief experiences in the life eternal. My ardent desire is to reach my friends on earth who are sending out of their homes the sons who may come home no more."

"A Reveille of the Life Beyond" is the explanatory title of the book. That Dr. Achorn himself designated the title, the color (a deep sea green) and design (a silver bugle in the upper left-hand corner) of its impression upon the book and other particulars of the book's mechanical design is stated by Dr. Hicks in the Battle Creek newspaper which had a half page write-up about the book on August 11th.

Method of Communication Is a "Mental Vibration."

The "author" says the method of communication is a mental vibration between harmonious spirits. "My secretary seems myself as I write. Her hand is given to my control as I might once have used a fountain pen."

Dr. Hicks says she is neither experienced nor especially well read in psychic research and that this has come to her in a most natural way. "About a year ago," she states in the preface of The Bugle, "I was sitting alone in the twilight with a pencil and pad at hand, when I wrote automatically, 'Hugh is my friend. Give him my love. L. Achorn.'"

Hugh is Dr. Hugh W. Conklin. Both Dr. Hicks and Dr. Conklin were classmates of Dr. Achorn in Kirksville, but although Dr. Conklin and Dr. Achorn were very intimate friends, Dr. Hicks knew him only as a classmate and in after years hearing of him through mutual friends or reading articles in the scientific journals.

Wanted to Be in the War

These communications increased and in length. From the beginning of the entry of the United States into the war

and the call for young men for service the communications expressed deep interest in the American cause and L. Achorn wished "to fire his Winchester." So with "exultation of spirit" the writings explained a command laid upon him to deliver to mothers whose sons should pass to life eternal during the conflict a message of assurance of their continued existence and progression in that life, their retained memory and interest in home and the earth friends.

Marvelous Book

From preface to conclusion the "author" tells his own story, and fashions his own message. As to his sensations in passing to life eternal he says he was at first dazed as one only partly awake, gradually becoming stronger and able to adjust himself to the new life. He soon realized that life there was one of progress and development and that the first step in that progress was to pay his earthly debts; that he brought with him a record of the past, some deeds to his credit and some to his debit and that his account must be balanced before he could go on to higher attainments. By his success in writing this book and reaching the woman in sorrow with a message of comfort he says he will have gained a credit in this balance of accounts.

Still Ministers as a Physician

In spite of his passage into another life the "author" asserts that he even now ministers as a physician to those on earth.

"A child is sick. The mortal parents are caused anxiety over its feverish condition. * * * A spirit hovers near. The child ceases its cry." Later, "Both patient and physician feel the subtle influence of my presence but neither could say that another purpose had been added to his own." Again the deep spiritual import of the book is brought out in this passage, "Many, many struggles are won because a friendly spirit is at hand strengthening, encouraging, upholding in the hour of despair. Many, many conflicts are lost because the soul turns from the spirit and does not in its inner consciousness hear the friendly voice."

Mothers of Men

The references to the war are most interesting. "Our foe is not a person," he says, "but a strength fighting and uprising against families and foundations of nations. The force is a force so evil that much good will stand against it; and good cannot fail, so our fight is won. * * * The balance of power rests between our fine young men and the beasts—our foes. * * * My secretary

says a train of men is leaving and speeding away. * * * This is my word of farewell and I say, 'Good-bye, old fellows, just smile and see the sunshine ever in the depth of darkness and evil shadows. * * * A falling man a rising star shall be. A man whose life is his country's, whose life is God's to use as an instrument to restore the world to brotherly relationship is never to be forgotten; rather he will rise to heights which others work many years to attain. The body of a man who falls upon the field of conflict is shattered by the blow; but rifles shatter only the body, not the soul. A tribute cannot recall them; but a glorious mission is mine, to write what I know of the soul which reaches our life."

"Must I remind you, mothers of men, that your sons who fight and fall on the battlefield are not lost? Only the mortal body ceases to be. The mind, the soul, the spirit will live on and on, ever increasing in power to serve men and save them from their own destruction."

George H. Dorans Co., Publishers

The George H. Dorans Company of New York are the publishers of the book. There are 108 pages

The book is remarkably clear, coherent, matter of fact and even intimate. Whether the book is accepted as to its origin, it offers a fine attitude toward daily living.

There is a great demand in England at this time for books of this character and the branch house of Dorans Company in England expect a large sale.

We congratulate Dr. Hicks upon her success as Dr. Achorn's secretary in the

compilation of the book, and trust that she may some of these days have a message for our profession.

Dr. Kendall Achorn practiced in Boston prior to his death in an automobile accident in August, 1916. His many friends will be more than pleased to hear of this wonderful book from beyond the grave.

The price of the book is \$1.00 and you can send direct to the George H. Dorans Co., New York City, mentioning us, or send your check to us and we will have the book forwarded to you.

SANDPAPER YOUR FINGER TIPS

Dr. Sutherland Presents Novel Idea

Dr. Richard Wanless, New York.
Dear Doctor:

Please find subscription remittance herewith for The Osteopathic Truth.

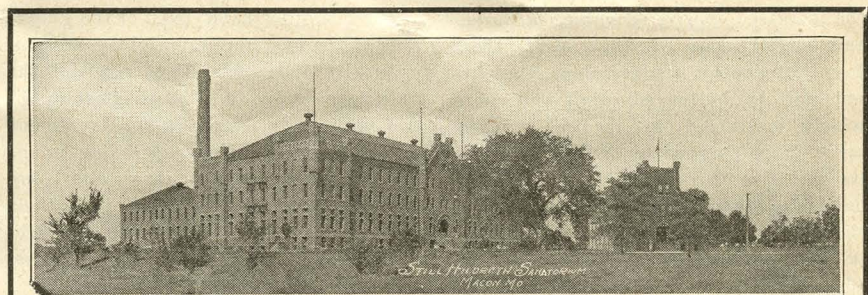
A perusal of Truth's columns is like applying sand or emery paper to one's ten finger ends. It puts an Osteopathic polish on the tactile sense.

For those who have difficulty in finding the lesion, advise this prescription:

One sheet of sandpaper. One sheet of emery paper. (Have prescription filled at hardware store, not drug store.) Rub the ten fingers thoroughly first with sandpaper; then rub ten fingers with emery paper. Repeat daily until the tactile sense becomes acute and you develop a chronic sense of daily tactile sense.

Prescription guaranteed. One sharpens a pencil. Just as necessary to sharpen up the fingers. Fraternally yours,

W. G. SUTHERLAND, D. O.
June 20, 1918.



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to the Above Institution.

A. G. HILDRETH, D. O.
Superintendent

Osteopathy

(This is the second of the report made by Justice Hodgkins in reference to the Osteopathic physicians in Ontario. The report was made to the legislature.—Editor.)

The honors are about evenly divided between those states who have an independent Osteopathic Board and those who retain some control in the State Medical Board.

I have in the supporting statement (B) devoted considerable space to the situation of Osteopathy in the United States, which is interesting and critical. It may be shortly summarized thus:

Four factors have recently emerged: (1) The effort on the part of the Osteopathic colleges to obtain recognition for their courses as equal to those in ordinary medical colleges by raising their standard. (2) The lengthening of their course, the stress laid on microscopic and bacteriological research, and the inclusion of pharmacy and materia medica in some cases. (3) the realization by the Osteopathic profession that this new departure endangers their identity and requires great effort to secure for the colleges students of intensive Osteopathy. (4) A division in the ranks of Osteopathy as to whether it is worth while to perpetuate the difference between it and medical science, in view of the similarity of studies and the length of course now required.

These things indicate with some clearness that the Osteopathic situation is a state of transition. The colleges, having taken these steps for better or for worse, need larger bodies of students to meet the increased expense of enlarged courses and longer terms. If they secure them from Osteopathic sources alone, the output will be better educated and more widely instructed in medical science, apart from Osteopathy, which will lose its exclusive character. If, on the other hand, the student body is recruited from those who are not markedly Osteopathic, it will be because the scope of the education will be wide enough to enable them to compete on equal terms with those from the ordinary medical colleges. In either event, the standard will change and on the effects of that change will depend the future of Osteopathy as a separate science or practice. The colleges have embarked on a course which will require great efforts to enable them to stand the competition of the larger and wealthier medical colleges, and it is evident from the expressions of those who realize the situation that the outcome is doubtful both as to

the ability of the institutions to stand the strain and as to the quality of the educational result. If Osteopathy can continue to maintain itself as a separate and exclusive cult, it will have demonstrated that it has in it the intrinsic merit which is claimed for it, although much enlightened and broadened since the time of Dr. Still. If, however, it finds that a more liberal education leaves it merely as one of the therapeutic methods used in the practice of medicine, it will naturally fall into line with other agencies heretofore employed in the healing of the sick. In either event it will be the part of wisdom on behalf of the authorities of this Province to decline any action that will precipitate here a state of affairs now probably passing away in the United States.

In order to ascertain whether this is merely a "present flurry" or a serious and fundamental crisis in the history of pure Osteopathy, I quote from a few of the most modern authorities among the Osteopathic profession itself.

The report of the trustees of the American Osteopathic Association, made to the Osteopathic convention at Kansas City in July and August, 1916, sets forth the position of the profession thus:

"It is safe to say that a majority of those now practicing Osteopathy were graduated when the course of study covered two years. Some of these, conscious of the success they have met with, do not realize or do not admit that the scope of practice needs to be materially different from that which they have successfully maintained.

"On the other hand, most of the graduates of the past seven or eight years, and especially those who have received the four-year course, feel that they are qualified both as to diagnosis and treatment of all acute conditions, including minor surgical and emergency cases, and being thus qualified they feel that it is their right and they desire to enter the field of general practice and demand that no restriction be placed in their way.

"The schools maintained that from their standpoint our education should be placed on either a two or, at most, a three-year basis, and Osteopathy should be taught and practiced largely as a specialty, its field being adjustment of body structures, plus attention to diet, hygiene and general measures common to all schools of practice; or the four-year course, with entrance equal to that demanded for the other professions, be instituted and the practitioners be given the rights and privileges consonant with

their pre-medical education and technical training. The colleges maintain that they should not be expected to meet all requirements exacted for graduates from the best medical colleges, and require them to give a diploma which, due to the legal restrictions in many states, means very much less in the field of practice than that given by an even inferior medical college.

"There are still others in the profession who believe that the educational standard now set and in force should be maintained, and that the teaching should in no sense contemplate the use of drugs in any form, nor should the profession favor or countenance legislation which grants this privilege to the Osteopathic profession. Those holding these views maintain that the field for Osteopathy is such that students sufficient to meet the growth of the profession will be forthcoming to the colleges when they give a strictly Osteopathic training.

"In the belief of your Board, it is in no sense necessary that the profession be unanimous in its opinion as to what the scope of the practice shall be, but it is, however, necessary that the profession be unanimous in its convictions as to the principle of Osteopathy. Loyalty to principle and liberality in detail must be our motto as we pass through this evolutionary and developmental period.

"Your Board has full confidence that when the present flurry passes over and the profession settles down to the stern duty of maintaining and increasing its growth, that differences will adjust themselves and harmony and co-operation will prevail."

At the same convention the Educational Department Committee reported (in part) as follows:

"A fundamental fault of some of the college instruction is that it lacks Osteopathic coloring or saturation. At times, with some of the teaching at least, no apparent continuous attempt is made to inculcate the basic principles of Osteopathy. No doubt many facts are taught, but frequently they lack Osteopathic interpretations, analysis and synthesis. It is the interpretation of a fact that renders it vital and practical; when this is lacking the ultimate effect upon the student brain may be deplorable. A curriculum that is Osteopathically correlated and unified can be the only solution. The future of our profession depends upon this, and this alone.

"Everyone is aware that we are vitally in need of Osteopathic literature—a literature that will crystallize our present knowledge of Osteopathic science

and application, and which, of course, will leave plenty of room for future development. The first requirement is that of the school, for, indeed, that is the foundation of our profession. It is basically wrong that our students must largely depend upon medical texts. No doubt, many of the teachers are capable of giving the right interpretation to the facts therein contained, but is this interpretation always presented, sustained and insisted upon? The personality, the ideas and the discipline comprise a teacher's qualification for doing good work and inspiring a student to make the most out of his life's work. But even if all of this is satisfactory, it is evident that most of the Osteopathic concept and discipline is simply a mouth-to-mouth instruction. Clearly, we cannot progress as we should, and permanently, unless we have definite published statements, records, suggestions, etc., of our scientific development."

After that annual convention, the official journal of the American Osteopathic Association thus expressed itself in September and November, 1916.

In September, 1916, it said:

"We, the practitioners, claim the profession as ours, and yet what have we done to lighten the burdens of the colleges without which our profession would soon cease to exist and prestige would greatly wane within the time of our active practice? For the most part we have proposed or submitted to the enactment of laws in our states without much regard to whether the colleges could meet the conditions imposed or not, thinking that it was the easiest way out for ourselves, or that it gave us prestige and established our practice.

"The condition has come about that either we must occupy the same plane as our imitators by reason of two or three years of college instruction or we must meet the educational standards set by the highest states for governing the practice of the drug systems. Up to this time we have undertaken to do these things ourselves—to have the colleges change from one standard to another without perhaps advising with them as to, whether from an economical standpoint it could be done. We have not undertaken this, however, in any case until one or more of the schools had taken the action, but perhaps we have, in some slight degree, undertaken to hurry the hindmost in taking the step.

"At least we have now gone too far to retrace our steps if we could. The legislation we have secured or submitted to requires of our colleges the steps they took at this meeting. This legislative

status could not be undone, and we go back on a two-year basis without a fatal shock to Osteopathic advancement. So far as we know, no one considers such a step. Then the only alternative is a hearty support of the present program. In the resolution now advanced by the colleges, or four of them represented at this meeting, they assume the responsibility for this move, ask the Board to give them a fair chance by making it uniform, and ask the support of the profession in sending them qualified men and women with which to make it a success."

In November, 1916, it said:

"We know the Osteopathic profession is not alive to its opportunities and we fear it is not cognizant of its dangers. A revolution is going to come about in therapeutics within the next few years. Changes indicating this are already taking place. Because we have failed to give the public an adequate conception

(Continued on Page 27)

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The SURROUNDINGS—ideal, combining the quiet of the country with the conveniences of a cosmopolitan city 15 minutes away.

The BUILDINGS—designed from an aggregate of over forty years' experience—not an old residence or institution remodeled; built for the business without regard to cost of furnishings or equipment.

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Rocky Mountain Conference A Huge Success

Signaller Skeyhill a Visitor

Barred from Hospital

The Rocky Mountain Conference had a surprise added to their program in the appearance of Tom Skeyhill, who had been so miraculously cured of blindness. Skeyhill gave a public lecture at the Burns Theatre on Thursday evening, the prelude being a glowing tribute to osteopathy.

Mr. Skeyhill was a guest at the luncheon Thursday noon, and spoke a few minutes in appreciation of what osteopathy had done for him. He also addressed the convention in the afternoon with reference to the war, and expressed the wish that the soldiers might have the benefit of osteopathy.

Hospital Incident

Friday morning was to be devoted to some operations by Dr. George Laughlin,

at the Glockner Sanitarium, all arrangements having been made in advance, but when Dr. Laughlin and the visiting doctors arrived they were told by the Sister Superior that the management had changed their mind and admittance was refused. This is the first time that Dr. Laughlin has had to suffer such an indignity in his many travels over the country.

The operations were performed at the office of Drs. Schoonmaker in the Bennett Building.

The Convention

The convention was a huge success from all standpoints and the newspaper publicity shows that a very favorable public opinion has been created.

The Pot Still Boils

Dr. Hildreth Was Accused of Trying to Persuade Dr. C. C. Teall from Joining the Faculty at A. S. O.

Kirksville "Daily Express" the Scene of Accusal and Denial

It seems that on Saturday, July 13th, there appeared an article in the Daily Express of Kirksville with large headlines entitled, "Dr. R. Platt Secured for A. S. O. Faculty. Well Known Osteopath from Minnesota Will Teach Here." In that article there appeared the following statement: "The rumor that Dr. Teall might not accept the offer to come to the A. S. O. is absolutely denied by Dr. George Still, who says that Dr. Teall told him at Boston that Dr. Hildreth had tried to persuade him not to come to Kirksville, but that he was coming anyhow and was going to give his best efforts to the A. S. O."

On Saturday, August 31st, page three of the Express, contains a letter from Dr. Hildreth, and affidavits from Drs. George Laughlin, Harry Still and L. Van H. Gardine and a telegram from Dr. C. C. Teall all denying that Dr. Hildreth had at any time used his influence to weaken the A. S. O.

Dr. Hildreth states: "While it is true that last winter in an article in your paper I did criticize the methods and teaching at the A. S. O., and said at that time that I felt osteopathy was not being taught in that institution as it should be taught, yet I did not then, neither do I now, say I would do one thing to try in any sense to weaken the said institution. Honest criticism, if but accepted in the spirit intended, should be an added strength and never a weakness; if there is anything wrong it is up to the management to correct it and I believe that all institutions should be given every opportunity to prove themselves worthy.

"The A. S. O. has meant too much to me and my friends in Adair County, whom I love and who are so near and so dear to me, and who are esteemed in such a way that I feel it only just to then and to me and also to all readers of your valuable paper that this statement be made that they may know just where I stand and where I have stood, relative to this school matter.

"Thanking you in advance for correcting this mis-statement, I am."

Dr. Laughlin's Letter in Part

Kirksville, Mo., Aug., 29, 1918.
Dr. A. G. Hildreth, Macon, Mo.

Dear Doctor:—I am in receipt of your letter in which you ask me to make a statement in regard to the several conversations we have had concerning the matter of my remaining with the school here in Kirksville. On the two or three occasions when this matter was talked over between us, you urged me to stay with the school, stating that you thought it would be for the best interests of the osteopathic profession for me to do so.

As you no doubt know, my resignation from the A. S. O. is entirely voluntary and is simply carrying out plans made for my future for several years back. In my new hospital, now in the course of construction, I believe I can continue to be useful to the osteopathic profession and will be in a better condition to develop my own specialty and to do better work. I am going into business for myself not with a view of becoming a competitor in a business already established here, but in order to be able to develop a field of practice not now as fully covered here as I hope to be able to do it in my own institution.

The best wishes of the school management here have been proffered me on my retirement from the teaching staff and in return I have only the best wishes for the A. S. O.

Yours truly,
(Signed) GEO. M. LAUGHLIN.

Affidavit of Dr. Harry Still in Part

State of Missouri, }
County of Adair, }
ss.

This is to certify that I have talked

to Dr. Hildreth at various times in regard to the school situation at Kirksville since the trouble there was started sometime in January. I can say truthfully that I have heard Dr. Hildreth encourage and urge Dr. Gardine and Dr. George Laughlin to stay with the A. S. O., and that he thought it was their duty to do so, so as to help hold the school together. I have also heard him encourage the students who were uneasy in regard to the school situation to stick by the old school, saying in the end the outcome would be all right.

*(Signed) H. M. STILL.

Acknowledged by Nannette Moore,
Notary Public.

Dr. Teall's Telegram

Weedsport, N. Y., July 19, 1918.

Dr. A. G. Hildreth, Macon, Mo.

At no time during our convention in Boston did you express other than pleasure at the prospect of my being connected with the A. S. O. Also you seemed confident I would teach only real osteopathy. You promised to talk with Charlie and show him my position only for the good of the cause, and not a personal matter. I did not wish to get mixed up in a family row.

(Signed) C. C. TEALL.

Affidavit of Dr. Gardine

Macon, Mo., Aug. 23, 1918.

To Whom It May Concern:

Since there have been statements made to the effect that Dr. Hildreth has been working against the A. S. O. in every possible way, particularly in attempting to persuade prospective teachers not to teach at the A. S. O., this applies especially to Dr. Teall, of New York, and also in attempting to persuade teachers there to leave with the intention apparently of damaging the school as much as possible, I would like to say that from the beginning of this school controversy Dr. Hildreth has advised me if I contemplated doing any more teaching in the future to stay by the A. S. O. in preference to going to any other school, although offers had been made me from three others.

I made this statement to Dr. Emmett Hamilton in Boston at the convention, which he will corroborate. Also, from Dr. Hildreth's talks to me I know he has never advised Dr. Teall not to come to the A. S. O., that he has always said since the A. S. O. had been the strongest school up to the present numerically, he thought every effort should be made to aid them in securing a good teaching force, and he should hate to see it run down in that respect very much. He also advised Dr. George Laughlin, to my knowledge and in my presence, to remain on the teaching staff, although Dr. George Laughlin refused to consider it; also Dr. Hildreth to my knowledge knew nothing of Dr. Waggoner's going, until I told him.

(Signed) L. VAN H. GERDINE.

Acknowledged by Nannette Moore,
Notary Public.

Addendum

We do not print the foregoing as a personality, but as a statement of fact appearing in the Daily Express of Kirksville, Missouri, and with the object of clearing erroneous rumors which have been afloat.

We almost broke all the rules of polite etiquette when one of our professional journals recently, in a convention write-up, made the statement that "Macon was represented by the head keeper and one patient." We are aware that breaking over the traces does not put osteopathy in the lead of all the healing arts and sciences, neither does "good humor" mistaken for "easiness" forever remain tolerant.—Editor.

Subscribe now for Osteopathic Truth

PACIFIC BRANCH OF THE A. T. STILL RESEARCH INSTITUTE RECEIVES GIFTS

The following gifts were received during July for the promotion of the work of the Pacific Branch of the Institute.

- Through Dr. Georgia Carter:
- Mrs. Katherine Keenan (add.).....\$25.00
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- Dr. Robinson (add.)..... 11.00
- Through Dr. Caroline Paine..... 35.00

Gifts other than money: Offices and laboratory supplies, Dr. R. D. Emery; animals, Dr. Clara J. Stillman.

Dr. Louisa Burns, the Dean, reports favorable progress at this branch of the Institute.

Osteopathic Truth: "Enclosed find my check for Truth. Thank the publishers for kindly sending the magazine monthly until the professional spirit within me was moved to remit. Dr. Vastine's article 'Do You Realize' and Dr. Drinkall's editorial, 'Tithing,' produced results. Dr. Drinkall's article was not signed, but he cannot disguise his work. I will ask the editor of our Ohio Association publication to reprint both articles."

Fraternally,
P. E. ROSCOE, D. O.,
Cleveland, Ohio.

SECOND ANNUAL CONVENTION OF THE AMERICAN OSTEOPATHIC SOCIETY OF OPHTHALMOLOGY AND OTO-LARYNGOLOGY.

**HOTEL BRUNSWICK
July 26-29, 1918**

This convention, as you know, is held and always will be held at least for some years to come, the week preceding the A. O. A. Convention, and is not only distinctive in its own program, but acts as an appetizer to the greater convention, bringing out a great many on time for "conferences" and health lectures and preparing them the better to get more out of the last week's work, not to speak of the added publicity for osteopathy and the benefit the participant derives by getting away from the office "grind."

Notwithstanding the somewhat extremity of location and increased travel expense, a larger attendance was present every day than at the Columbus Convention, one day the attendance reaching 75, with 7 from California at \$500.00 per.

Interest ran unusually high as a good program had been provided, one subject being assigned to each session and numerous ones who confine their practices to "general" work expressed their gratification for the privilege of attending as the interlinking of the general body functions with the functions of these special parts proved conclusively that while the Osteopath differs from the Medic in that the Osteopath adjusts structure and function, we need the Osteopathic specialist to study and develop a technique for the Eye, Ear, Nose and Throat that much foolish surgery performed by the Medic may be eliminated and a proper understanding among the profession of what is surgical and what is straight Osteopathic.

Notably from the years program was the uniformity in results in Hay Fever, few reporting less than 100 per cent, including surgical cases, and what pleased the retiring president. Dr. Ruddy more than any other one thing was the gradual death of the radical "Finger Surgery," and the adoption of his "Finger Method" as first presented at the Detroit Convention, it having been proven by advocates of the "radical" treatment that the "conservative" method does the work.

This is of vital interest and every

osteopath should take notice and bring forward the results of his work next year.

Nearly 250 paid applications were taken during the Convention and the "Book of Proceedings," a 125 page book, 7 x 9, teeming with technique and helpful hints will be delivered to the members only, before September 1st. Membership fee is \$1.00.

The officers for the coming year are:
President—Dr. J. Deason, Chicago.
Vice-President—Dr. J. H. Bailey, Philadelphia.
Secretary—Dr. Harry Marshall, Des Moines.
Treasurer—Dr. C. L. Draper, Denver.

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or

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Carthage, N. Y.

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FOR THE OSTEOPATHIC PROFESSION

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SEPTEMBER, 1918

Work for H. R. 5407

DO NOT PUT THIS OR ANY OTHER PROFESSIONAL JOURNAL ON YOUR RECEPTION ROOM TABLE, FOR THE ARTICLES CONTAINED THEREIN ARE NOT ALWAYS FOR PUBLIC CONSUMPTION, ALTHOUGH POINTEDLY INTENDED FOR YOU.

Going Backward

From B. J. Palmer's Fountain Head News

"THE OSTEOPATH is the name of a magazine published by R. H. Williams in Kansas City, Mo. On P. 2 I find an article that is worthy of repetition. I quote it verbatim:

"The following letter from Dr. A. H. Zealy, Goldsboro, N. C., was not written for publication, but it is so interesting that I have urged Doctor Zealy to allow me to publish it.

"Doctor Zealy, you will note, is not astraddle the fence, but comes right out in the open and states his convictions. Whether you agree with him or not, you can get much that is good from his letter":

"I have just finished reading the last number of The Osteopath and feel that it is my duty to tell you that I get more satisfaction out of your journal than anything published in the Osteopathic profession.

"You are doing more for Osteopathy than any man I know. Your utterances, together with those of your contributors, are just what this profession needs. Likewise you show splendid judgment in the articles you copy from other periodicals, the copied articles in this month's issue contain much food for thought.

"The leaders in our profession are butting their brains out against a solid wall by trying to advance in the same direction they have always traveled. It is probably the wrong feeling for me to have, but I rejoice inwardly when anybody in the profession rises up and goes against these leaders, who are not getting us anywhere.

"I FIND MYSELF IN SYMPATHY WITH THAT CROWD OUT THERE IN YOUR CITY WHO HAVE INAUGURATED A MEDICAL AND OSTEOPATHIC COURSE COMBINED. And the men behind the school are not men that I have admired, but I do think that they are starting something in the right direction.

"OUR SCHOOLS SHOULD CONFER THE M. D. DEGREE AND STOP ALL THIS CONFUSION OVER LEGISLATION AND SERVICE IN THE ARMY. We could still be Osteopaths and be so much more in addition. As it is, we are just Osteopaths. Who knows but that the action of this school in your city may be the means of compelling the other schools in the profession to do the same thing. PERSONALLY, I HOPE IT WILL COME TO THAT.

"I do not blame the war department for not accepting our men on an equal footing with medical men. OUR PEOPLE WANT TO DO SOME OF THE THINGS

THAT MEDICAL PHYSICIANS DO WITHOUT HAVING THE PREPARATION THAT MEDICAL PHYSICIANS HAVE.

"I have been asked to do active work in North Carolina in the interests of the Osteopathic colleges—sending students to them. But I can't do it. Osteopathy as it is today does not impress me sufficiently to try to induce some well prepared young men to enter it as a life profession. I feel that he would pretty soon find out that I had advised him wrong and would thereby forfeit his confidence.

"IF I HAD A SON READY TO ENTER A PROFESSION, I WOULD USE ALL MY INFLUENCE TO KEEP HIM FROM STUDYING OSTEOPATHY AS IT IS TODAY.

"Until two or three years ago everything in the way of disease was traced to the Osteopathic lesion, and its cure depended on the adjustment of the Osteopathic lesion, but since then we found it necessary to broaden our etiology and apply our adjustment to other conditions besides the Osteopathic lesion.

"As a rule, I do not think that Osteopathic results come from correcting structural perversions, but rather from manipulation of the body fluids and reflex stimulation.

"OUR SCHOOLS SHOULD ASPIRE TO MAKE PHYSICIANS AND NOT OSTEOPATHS. FOR THE SAKE OF M. D. They could preserve their identity by distinguishing themselves as colleges of Osteopathic medicine.

"Adjustment in the broad sense is the underlying principle of Osteopathy and that principle could be preserved and fostered UNDER THE TITLE M. D. as well as under that of D. O."

It presents two points for consideration.

1st. The writer wants the Osteopaths to become physicians; says that is what they are anyhow so why not be in name as well as spirit.

2nd. That Osteopaths are doing the things of medicine; asking for the privileges of physicians, therefore they should have the training.

I would be hard to gainsay but what many of the things said by Dr. Zealy are true. Osteopathy is not what A. T. Still taught years ago; it is not what he believed it to be. When the leaders of the profession, upon whom has fallen the mantle of priority of rights, become more interested in blooded stock and banks than in Osteopathy it should be expected that it was going to lose its virility.

When that begins, the seed of disintegration has begun.

Osteopaths were anxious for legislation; cried for it; begged for it. Osteopathy had more Oswalt's, Blackmer's, Fenner's than has had chiropractic. They compromised; anything, Oh Lord, for a license, just so it wears pants. They have the licenses; in thousands of instances handed them on a silver platter at their request by medical men. They were given antidotes which has eliminated Osteopathy from future growth. They took the wormwood which made the schools teach medical subjects to get their boys by. They took the highest preliminary educational qualifications. Medical-Osteopaths began to come out of these schools. They drifted farther and farther. Dr. Still was too old, his sons were not vitally interested, its real self waned. They became what they did not want to be. They are now what they hate to be called. There is nothing in their name. It exists as a hollow mockery. Osteopathy is 90 per cent medicine; Osteopaths are 90 per cent medical in theory and practice. They have the same breed of illiberality and cussedness of fighting us as the people they have always imitated and aped.

Says this man: "Our schools should confer the M. D. degree AND STOP ALL THIS CONFUSION OVER LEGISLATION." This is the nub of the thing. That is what Oswalt did in Ohio. That is what others would have done in New York.

There is no question that the turkey won't fight after he has placed his neck on the block. The minute chiropractic gives away its individuality and becomes medicine; when chiropractors gives away their distinctiveness and become medical men, that moment they can get licenses to practice "a limited branch of medicine and surgery" and be fit subjects for a license at the hands of Mine Friend the State Medical Board and then is the time to prepare the shroud and have it ready for a decent funeral service and cortege, for it will not be long arriving.

This laying down to the thing is the issue which chiropractors WON'T stand for."

Are We?

We have copied the foregoing item from page eight (8) of Volume 7, Number 49, August 17th, issue of Fountain Head News, by B. J. (Himself).

We have reproduced this article as presented by Palmer with a particular motive in mind. His remarks have told as well as we could, and perhaps better, what the founders and supporters of "Osteopathic Truth" have recognized

for some time, what we are fighting against in retrograde tendencies, and what we are fighting for in the way of progression to put A. T. Still Osteopathy where it rightfully should be.

We would deny that Osteopathy is 90 per cent medicine and that osteopaths are 90 per cent medical in theory and practice. We cannot deny the fact that education comes from schools and we will practically be what our schools make us. Our progress lies fundamentally with the schools professing to teach Osteopathy. This year will be a great trial year in the history of our colleges, particularly from the teaching standpoint, and if found wanting by the profession the present guiding spirits may find it best to evacuate the fort.

If we are rotten at the core, or in other words at the foundation, which primarily is the teaching institution, then we must apply the same treatment that we would to an abscess which is rotten at the core.

There is no use fooling ourselves to sleep or into the belief that a certain serum will affect a cure when we know down in our heart of hearts that the fundamental education must be right to withstand the storms in the field. We should face the issue as the soldier faces the foe, if die we must then with the bullet in the front and not the back.

The Motive

The motive of copying this foregoing article was to arouse your ire, in fact to make you mad enough to fight and if in the few subsequent remarks we can make you realize, we will have accomplished our object.

It is high time that the M. D.'s in the Osteopathic ranks move out and on. One either is or is not an Osteopathic physician; there is no half way ground. Oil and water have never mixed, never will; neither will Osteopathy and drugs.

The practitioners who have made the name Osteopathy a hollow mockery, if it is, are the ones who through the display of the two titles M. D. and D. O. caused their hearers to believe that they were possessed with a superior knowledge and through the laymen's ignorance to properly discriminate, have told them that Osteopathy was all right, but that they believed some drugs should be added. It is these same people who in the telephone book are listed as D. O.'s for their city office and as M. D.'s at their residence.

We do not deny any man the right to secure an M. D. degree and what it means, but if the D. O. degree is to some day stand at the head of the healing

art and science, then no person professing to be an Osteopathic physician will ever be so ashamed of it that he will hide it, or even display M. D., and thereby create an erroneous impression.

Either get in or get out.

Some people are studying Osteopathy today in order that through the prestige given by the D. O. degree they will get a practice quickly, and then, either through laziness or faulty teaching, they resort to drug giving. This creates disgust and distrust at once, for those patients went to the D. O. sign for adjustment of the human body and received that which they wished to avoid by not going to the M. D. sign. Palmer and his crew are reaping the grain sown in the corners of the field. *We always reap what we sow, but not all of it* because the reaper does not get into the corners.

Oh! Thou Judas!

The drunkard can never be reformed by marriage and the criminal is not changed by a term in the "pen," but we can make our organization mean something by not allowing such as these membership. The dentists do not allow any Tom, Dick and Harry to affiliate, and then they teach the people that their membership means a dentist worthy of the name.

D. O. and M. S.

We need surgeons. The degree Master of Surgery is designated by the letters M. S., and we should teach the people that all major operations should be performed by a Master of Surgery. Those Masters of Surgery should be D. O.'s. Cannot some of our schools apply for a charter to give the M. S. degree so that our future surgeons need not attend a drug school?

Education is everything and our future depends upon the way we educate the people now. Our future profession depends upon how our students are educated now.

There is one guide post for our action in the Feld; there is one guide post for the teaching of the student; there is one guide post for the conduction of our organizations; and there is one guide post for the education of the people. That guide post is "Our Platform," written by Andrew Taylor Still himself.

Seek, and ye shall find it, on pages 14 and 15 of his Research and Practice.

Oh! thou Judas, turn and behold the havoc your betrayal has wrought.

Out of our failures come our greatest successes and so if we must acknowledge defeat we will study the case more thoroughly and with the finding of IT we will fix IT, and in the fixing there can come nothing but success.

HR 5407 Osteopathy in Deed Only

In the Army

The two letters below are self explanatory. We are glad for the soldiers that they are even given this small amount of attention but cannot help thinking of the possibilities of assistance if big-otry did not stand in the way.

American Red Cross, Base Hospital,
Fort Oglethorpe,
Chattanooga, Tenn.

June 28, 1918.

.....
There are five of us in the Massage Department of General Hospital No. 14, Ft. Oglethorpe, Ga. We are all four-year Osteopaths,, who is a corporal,,, and myself. We will all be sergeants pretty soon, as it is necessary in our work that we should have that authority, and we deserve it. The wounded men are arriving from France, and they are the ones who are going to be given "good massage" for their ills very soon. Our work has been successful and we have encountered no opposition. On the other hand, we have been applauded by the officers many times, and sometimes they treat us like officers. They like to talk Osteopathy because they really appreciate it, but we tell them we are only "masseurs" now and discuss medical questions with the officers that a masseur never heard of. But for the patients, poor fellows, we do as much as we can by massage or OSTEOPATHY, except that we can't hurt a patient, because all the patient would have to do would be to say that we hurt him, and we would get court martialled. A major got discharged here the other day for a very slight and very justifiable punishment of an obstinate patient. The patient "told on him." So we could do more good if we could treat them as we wish, not being limited. MASSAGE, its principles and practice, by James B. Mennell, M. A., M. D., B. C., etc. Medical officers, physico-Therapeutic Dept., St. Thomas Hospital; Civilian medical officer in charge of Massage Dept. Military Orthopedic Hospital, Sheppard's Bush, with introduction by Sir Robert Jones, C. B. FRCS, Colonel RAMC, Inspector Military Orthopedics, is the book we use. Published by Blakiston's Son & Co., 1917.

Signed,

Extract from another letter from same lad:

"Do you know what we do? We are given certain patients and we treat

them osteopathically, if, after the diagnosis, we deem it necessary. We are having great success, too. I have to make out seven case histories and treat four patients before three o'clock. Then we have two lectures, the first 'Hospital Methods,' and the second, 'Splints and Plaster Cast Making.' Officially we are MASSEURS and our work is reported to Washington as such, but we are told to use Osteopathy when necessary (unofficially). We are Osteopaths in DEED, but not in NAME."

Are you getting your office equipped on an up-to-the-minute business basis with an addressing machine and a letter duplicating machine ready for the coming legislative session? There should be no delay in getting these machines installed in order that you may enlist your patient quickly when the word comes from the commander-in-chief. It is absolutely impossible to get letters out by hand when you are busy, so you should turn them to the machines made to relieve you of those details.

Those machines are always going to be well worth all you pay, for you will have an up-to-date mailing list for booklets and other educational matter.

Our boys, serving as privates, are indeed worth a few paltry dollars. They are worth every cent we can earn or borrow to place Osteopathy at the head of all healing sciences.

Pioneers on the frontiers knew nothing but privation, but we as pioneers fighting to put Osteopathy where it belongs look only to ourselves and begrudge the penny we spend to advance our science in the eyes of the world. Self-satisfaction will win nothing. We must apply the very latest achievements of the business world to our problems and permit ourselves to be organized into a great machine by those who have been chosen to direct us in order that autocracy of the A. M. A. may not crush us and our allies.

Our allies, the people and kindred organizations that believe in medical freedom, cannot know our desires unless we communicate with them, and since writing by hand is slow and tedious, we advocate each physician or group of five or ten, or less, equipping a central office from which place they can send out quickly letters or cards. Bullets that go direct to the mark from machine guns are what we need to get our millions of friends working for HR5407. The ma-

chine guns of which we speak do not cost much and on the group plan are within the reach of every Osteopathic physician on the globe. Machine guns shoot rapidly and so will an addressing machine gun run off from 1,000 to 1,500 addressed envelopes in an hour, or letters.

Talk the matter over with your neighbor, show him this article, and begin at once to establish a business office of machine guns. Co-operation will win HR5407.

RED CROSS AUXILIARIES

Have the Credit for Your Patients
and Your Own Work Given
to Osteopathy

In accordance with the watchword of the hour—Service to Our Country—a committee has been organized to push the work for the Red Cross in the Osteopathic profession.

An enormous amount of work is being done by Osteopathic women and turned in through clubs, churches and other avenues, which should be increased and made to count for Osteopathy.

It is the desire of the committee to organize a Red Cross auxiliary wherever it is possible to get ten or more women together under the leadership of Osteopathic physicians.

The supreme need is for surgical dressings, which would seem to be the work best suited to our talents.

The New York Osteopathic auxiliary has sent a camp kitchen to France in addition to hundreds of surgical dressings and garments, by devoting one evening and one afternoon each week to the work.

If you are interested in this project, write the committee at once for suggestions and help in organizing.

ADA A. ACHORN, Chairman,
MARTHA PETREE,
AURELIA S. HENRY,
LILLIAN WHITING,
MRS. H. F. UNDERWOOD,

Committee.

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Meet Us at the Next A. O. A., 1918

OSTEOPATHY

(Continued from Page 21)

of the practice of Osteopathy and of the scope of its application, are we going to allow our imitators on the one hand and on the other the medical practice, forced by a public demand to give up drug medication, to appropriate and practice the tenets and principles of Osteopathy, simply because we have failed to educate the public that these principles and tenets are ours? This is the most serious condition confronting the Osteopathic profession. This recognition can be brought about by the rapid increase in numbers of these rank imitators of Osteopathy, they having no restrictions to their entering practice, and by freely advertising they can reach those whom we, through indifference, fail to reach. And the medical profession is already turning and shifting to natural, physiological remedies, because it is being proven that drugs instead of aiding are a block to physiological processes within the body."

In his presidential address before the Ohio Osteopathic Society annual meeting, October 20th, 1916, W. A. Gravett, D. O., said:

"Beginning with early graduates—and in so doing it must of necessity follow, graduates of the present school—they are sent out as embassies to the different states, presenting a new therapeutical doctrine—they had received their instruction and inspiration from the proponent—he himself believed then and he believes now (as is evidenced by his original writings in later years) that the Osteopathic etiological concept of disease is all-sufficient, that it is fundamentally comprehensive, and that the application of this philosophy should be the basis upon which we should reason ourselves out in any therapeutical emergency. This concept was accepted as an axiomatic truth almost universally by these graduates. Seriously and with confidence they endeavored to practice the healing art in all its recognized branches, except surgery, from this viewpoint. They met with success and were proving the efficiency of this doctrine to the satisfaction of the laity, and could they have continued along these original lines perhaps the science would be farther advanced than it is today.

"But these practitioners were shortly made to know that there are certain therapeutical procedures and methods relating to the public health which have by common consent come to be considered a necessary part of any system of healing. Dr. Still, himself a practicing physician for years, realized the necessity of preparation along these lines, but

he consistently maintained that the Osteopathic viewpoint, relative to the public, was different from that generally maintained, and these graduates were prepared to meet these conditions in this way, but unfortunately their viewpoint was not accepted, and while these men demurred they eventually had to submit.

"The situation varied in the different states, each sooner or later solving the problem for the best interests of all concerned, as they honestly believed. Other states were not so fortunate as Ohio in limiting the requirements which were forced upon them and the science has been more or less compromised thereby in that our schools must prepare all students to meet the most extensive and exacting of these requirements. Thus it became necessary for them to diverge from their strictly Osteopathic course, and this deviation once started gained momentum under its own impulse and later factors exercised an untoward influence, and the schools now find themselves following a vacillating course like a ship at sea without chart or compass."

I now give extracts from statements of those who are in a position to speak with authority owing to their connection with the American Osteopathic Association.

Dr. Chiles, its Secretary, in his statement before me, practically admits the divergent views at present prevailing in Osteopathic circles:

"I have no doubt this matter has previously been brought out before the Medical Commission, but may I be permitted to say, Mr. Commissioner, that there is—I would not say a division in the profession—but there are in a way two wings; there are those who are perfectly willing to depend to the last ditch on what we call genuine Osteopathy, or what has been named 'ten-fingered' Osteopathy—that is, what you can do with your hands and with your common sense. These would prefer to call in a medical man, if necessary in an emergency, rather than undertake to do any medical administration or any surgical work themselves. There are others—those that you spoke of in Ohio—who are criticising the present law, who feel that when they have put in four years they ought to be considered qualified and that the law ought to give them the privilege of doing anything which their judgment dictates should be done in a given case. Where you find any division at all, the line up cleavage is between the two right there. I think the large majority of the profession feels that we had best for the present limit our practice to what might be called strict Oste-

opathic interpretation. The others feel that it is their duty to the community to go the limit, do anything that their judgment indicates ought to be done, and that I believe constitutes the dividing line all through."

That this division must be traced to the action of the State Medical Board, in raising the standard of requirements, is also, I think, clear.

Speaking of the Committee on Education, Dr. Chiles says:

"This Committee on Education, made up of several members of the profession not connected with colleges and also representatives of the colleges, works with the colleges from several angles. The first, of course, is: 'What constitutes, from the practitioner's standpoint as well as from the college man's standpoint, the necessary qualifications for the practice of Osteopathy? What subjects necessarily enter into the question of equipping a man or woman for his or her best work as an Osteopathic physician?' Secondly, what the state requires. It is not fair to a man to take him into a college and graduate him if we cannot give him a field for practice. Therefore, the requirements of several states have to be taken into consideration and that, I am perfectly frank to confess, has considerable influence on

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our standards of education—that is, as to what subjects go in—and sometimes we put into the curriculum what we consider is not germane to Osteopathic education, but the state says we must have it.” . . .

“Here we are confronted by a situation different from the conditions met with elsewhere, in that we have some forty odd states, practically all of which have now enacted Medical Practice Acts regulating the practice of Osteopathy either as a separate Act or providing for it as part of the Act governing the drug practice. If, for instance, a state like New York sets up requirements that the colleges think they are not justified in meeting, it is up to the college to say whether it will simply do business without fitting men and women to go into that state, or whether it will meet the requirements of that particular state. Some of the colleges meet the requirements in all of the states; some of the colleges do not, because they do not think they are called upon to do so, for the reason that these requirements are essentially technicalities. I think probably there is no use going into the details of that, but just on the side let me say this: New York, for instance, requires that every student who enters a college which New York State recognizes must have had a year in Biology and Chemistry and in Physics before entering the college—not only the students that come to New York, but everyone who enters the college. Some of the colleges feel that it is not worth their while—that half a dozen or so students

that want to go to New York do not justify it.”

He admits that state requirements tend to lead away from Osteopathy. Speaking in New York, he says:

“I think that New York State has influenced it very materially. As far as the states are concerned, whether rightly or wrongly, New York is looked upon more or less as maintaining the highest standards; when New York State recognizes an Osteopathic college, rightly or wrongly, that college feels proud and others want to get into the same class.”

And later he says:

“Any of us will naturally take a certain amount of pride in that, and yet we know that the tendency in that may be to lead us into the ranks of conventional medical education, rather than to insist upon our own characteristic and fundamental principles as heartily as we would prefer to do.”

This tendency seems to be quite pronounced. As to California, Dr. Chiles says:

“California divides practice up into two general sections—unlimited license practicing anything you please when you obtain it, and a non-drug license. A great many Osteopaths in California, especially among the older graduates, have qualified under the non-drug or limited license. A great many of the newer ones who have attended college four years, the same as the medical people do, do not feel justified in accepting this very much looked down on license, in consideration of the time that they

have spent to secure it, so the college there had put in a course in pharmacology and materia medica, which is taught by an M. D. Osteopath, who teaches it, as he maintains, and as the college maintains—and I have no doubt is the case—from the Osteopathic standpoint, but it enables them to have that much knowledge that they are able to pass the examining boards, taking the examinations with the medical students.”

Dr. Meacham, president of the American Osteopathic Association, gave his views in this way:

“Q. Your association, I suppose, has endeavored to bring about a better standard and condition?

“A. Decidedly.

“Q. What has it accomplished in that way?

“A. I was going to say ‘Wonders.’ You understand that any movement of this kind has to start from one man and then go to several and then to hundreds and thousands. In the beginning these schools were established primarily as money-making institutions, similar, you might say, to little business colleges where they teach shorthand or something like that—not as professional schools at all. That was the condition that prevailed some 20 or 25 years ago, but as men began to get hold of the idea that Osteopathy was a profession and that people should be trained for it as a profession, there was immediately a push against the professional idea in the ranks, and the money-making idea in the men who had invested in property and equipment for school work. Through those organized efforts we have forced these schools to adopt a standard of education that is equal to that demanded by the American Medical Association, which has State University endowments as well as private endowments behind it all the way through. We have forced them absolutely up to that standard.

“Q. To that same standard?

“A. Yes.

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"Q. So that your standard is the same as that of the American Medical Association?"

"A. Yes. I may say that one can take a catalogue of any recognized Osteopathic college and strike out the words 'Principles, theory and practice of Osteopathy,' and insert the word 'Medicine,' and you have got practically a medical curriculum. You quite understand what I mean?"

"Q. Yes.

"A. If you compare the number of hours of study, the number of lectures, the number of laboratory hours, the number and character of studies as given in the medical schools with those given in the Osteopathic colleges, you could not tell the difference."

I may add here that in the Supporting Statement "B" there will be found ample and detailed corroboration of Dr. Meacham's statement.

Dr. Copeland, dean of the New York Homeopathic Medical College and Flower Hospital, New York, in his statement said:

"So far as Osteopaths are concerned, my impression of them is that their schools so nearly approximate to medical schools and the same examination is necessary to acquire the medical licensing certificate, and they are all anxious to come in now. In the administration of our college I find dozens of Osteopaths applying for admission; they are keen to come in and take that additional year in order that they may become doctors of medicine."

Dr. Elfrink, Secretary Illinois State Osteopathic Association, said (p. 1638) that the Osteopaths were anxious for classification on practically the same standard as that of the regular physicians.

Dr. Mills, Assistant Dean of the Chicago College of Osteopathy, says that he expects the training that his students received to be as broad as that possessed by any physician.

Dr. Haslett, a member of the Osteopathic Board of Ohio, thinks they should have the right to perform major surgical operations and to use antiseptics and anaesthetics. He also says that the course of study in the osteopathic colleges compares very favorably with that of the regular medical colleges.

In Pennsylvania, according to Dr. Snyder, President of the Board of Osteopathic Examiners, pharmacology is taught. He says:

"While we learn the toxicology of drug therapy, we do not study drug therapy with a view to therapeutic action. We do not employ drugs for therapeutic effect. We employ drugs as

antidotes, for sanitary purposes, as disinfectants and germicides, but we would hardly use a drug as a stimulant, neither would we employ drugs to any extent as purgatives or sedatives."

And Dr. Flack, dean of the Philadelphia College of Osteopathy, adds later on that the reason drugs are taught in California is because there is a state law that must be met.

Dr. Elfrink, Secretary State of Illinois Osteopathic Association, says that the teaching as to the value and use of drugs is essentially the same as that of the medical student (p. 1631).

This situation in the United States, in the light of those and the other facts more particularly detailed in the supporting statement "B" appear to me to be this:

In 1897 the course for an osteopath was, as a rule, two years of ten months. Ten years later it was changed to three years of nine months each, while latterly, except in the case of the colleges at Des Moines and Kansas City, the four year course has been adopted.

Then, when confronted with the state requirements, the solution made by those in authority appear to be somewhat of this kind: That distinction should be, if possible, drawn between what are known as fundamentals, both in preliminary and medical education and training, and the therapy of the system—that is, the method of cure that are used. Upon the fundamental branches they are willing to submit to such regulations and standards as may seem proper with regard to all medical education. So far, this would seem to meet with the approval of every one, no matter of what medical persuasion he may be. The difficulty will be in agreeing upon what are the fundamentals; but putting that aside for the moment, the only difference set up by the osteopaths is in applying their therapeutic remedies, and these should, they think, be under the charge of a committee or board constituted by themselves.

They quote Dr. Andrew S. Draper, Commissioner of Education for the State of New York, to this effect:

"It seems to me the state must eventually come to the point of exacting different measures of education and experience from those who practice the healing art in different ways or use means of differing instrumentally. For example, the training required by those who administer drugs is bound to be more extensive than that required by those who do not, and the training required of surgeons is bound to go further than that of those who do not resort to the instruments of incision."

And they quote him as recommending "That the Board of Regents advise the practice of legislative discrimination between the requirements of the scientific training of those who only manipulate the body, those who only prescribe medicines, those who perform small external operations and those who perform major operations in surgery."

That quotation, I think, supports the distinction which I have mentioned.

The difficulty I have mentioned crops up, however, as soon as one comes to fix the dividing line.

A method of curing should not dominate the diagnosis. Yet this is what it really comes to. Dr. Snyder, the Chairman of the State Board of Osteopathic Examiners in Pennsylvania, in answer to my question (p. 2033) says:

"Q. Would this express the idea that I think I have gathered from you, that there is this difference—that having your theory as to what causes certain diseases you teach anatomy having in view the peculiar way in which you are going about curing them?"

"A. That is constantly before us, yes."

Contrast this with the view of Dr. Baldy, President of the Bureau of Medical Education and Licensure in the same State of Pennsylvania, whose duty

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it is to see that proper examinations are held (p. 2023):

"Anatomy is an exact science; you cannot get away from it, and therefore being an exact science why should there be any osteopathic anatomy and why should there be a different medical anatomy?"

The confusion thus produced between these two departments, theory and practice, exhibits the difficulty of making any fine philosophic distinction between medical viewpoints. And this confusion is productive of grave results, because in Pennsylvania the osteopath gets the same unlimited license as a medical practitioner, and can use drugs and perform surgical operations, issue birth and death certificates and treat all manner of diseases.

I may perhaps quote Dr. Mills (p. 1701), Assistant Dean of the Chicago, College of Osteopathy, which has been recognized by the New York State authorities. He says that certain members of the profession are pleading for the right to know both osteopathy and materia medica and adds:

"Osteopathy is comparatively young, but it has grown independently; but if Osteopathy were included in the medical course it would be rather lost sight of. It is so much easier to prescribe medicine that it would not develop any further. It has developed independently, but when this question is thoroughly developed, I imagine the outcome will be some combination, and that medical education will be extended that way."

It is in this direction that the authorities of the State of Illinois would like to move. (See statement of Dr. Drake, Secretary of the State Board of Health, Chicago, Ill., pages 1679-1680.)

There are no osteopathic schools in Canada. Every graduate in Osteopathy who comes here to practice has learned his art and science in the United States, where it is now in a state of transition. There are no schools which our provincial authorities can inspect and classify, so that perforce, if osteopathic physicians are admitted to practice here, we must depend for the standards of training upon the vigilance of some one or more state boards in the United States.

That being so, why should we require less than they do, and why should we allow any one to practice Osteopathy in Ontario who would be debarred to be as high as those who stand first in the official register of that State. It would therefore be a backward step if Ontario were to fail to recognize both the upward tendency of Osteopathic teaching and the tacit recognition of high

standards of medical education evidenced by its acceptance of registration in the most stringent State of the American Union.

Another pertinent inquiry may be thus stated: Why should there be created here a condition which the parent bodies themselves are endeavoring after long years to eliminate, and that just at a time when the movement toward an understanding seems about to be successful? And that success will mean much to both parties.

Manipulative treatment is becoming more and more recognized as a valuable agent in the cure or alleviation of diseased conditions of the bones and joints. The Osteopath applies it to all conditions, the regular physician not enough in suitable cases.

The result, in my judgment, of declining to permit separate educational requirements here will prevent, in this Province, the establishment of a state of affairs which would prove a stumbling block in our way, if in the United States a solution of the problem is satisfactorily reached.

If Osteopathy is taken seriously by its adherents, as is now evidenced by the efforts made to reach higher standards, it will sooner or later result in one of two things—either that the Osteopathic colleges will become to all intents and purposes regular medical schools, including both manipulation and drugs, or there will be established in the medical faculties chairs of what may be called manual therapy. But to separate the Osteopaths at present is to postpone, as has been the result of the special legislation in the various states, the realization for union and to embarrass the efforts of those who are striving to raise and maintain the high standards now required in medical education.

The bald fact cannot be denied that where a State in the American Union has put the Osteopathic student upon the same or practically the same footing as the ordinary medical student, the Osteopathic colleges and the profession have accepted the situation and not the requirements. I do not see why Ontario should be less decided or her requirements less worthy to be followed.

Only three of the provinces of Canada have provided for the admission of Osteopaths to practice; namely, Alberta, Saskatchewan and British Columbia.

In Alberta, since 1916, a candidate for examination for license as an Osteopath must have the same preliminary education as an ordinary medical student and a graduation diploma from a recognized school of Osteopathy. This latter intro-

duces the American Osteopathic School requirements.

In the examination for license, candidates have to pass the regular medical examination, except in surgery and medicine, the examination in surgery being confined to surgical diagnosis and the conduct of minor operations, and for medicine is substituted the theory and practice of Osteopathy.

Those practising Osteopathy for four months prior to May 9th, 1916, may obtain licenses if they are graduates or licentiates of a school, college or association recognized by the American Osteopathic Association.

(This is the second installment—the third will follow next month.)

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Louisiana Osteopathic Association

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SHREVEPORT, LA.

HENRY TETE, D. O., Secretary
NEW ORLEANS, LA.

Send all items for this Bulletin to the Secretary.

LOUISIANA SENDS A MESSAGE

A Welcome for All

Louisiana would desire to send a message to the entire Osteopathic world in an invitation to come and locate in our wonderful State. The State even offers an opportunity to go rice or cotton farming and at the same time practice in an adjoining town. This is indeed a combination for those who would delve into Nature's bosom for profit and recreation almost beyond the fondest dream. Many cities and towns are crying for an Osteopathic physician.

The balmy climate all the year round should be an extra inducement for those who would hie away from the cold of the Northland. An erroneous impression is often shown by inquiries asking if there is much malaria, rain, or mosquitoes. Louisiana has an exceedingly healthy climate. It very seldom gets below fifteen degrees above zero in winter, and the Gulf of Mexico tempers the hot days of summer so that a blanket is usually needed each night. It is therefore, playtime all the time in Louisiana.

Excellent Law

The law governing the practice of Osteopathy in Louisiana is one of the best in the United States. The practice is controlled by an independent board of Osteopathic examiners, the members of which are listed at the beginning of this page. Osteopathic physicians can practice obstetrics and surgery. They can also use anaesthetics, antiseptics, and antidotes.

Some Pointers

The following nine points will be of interest to those who are seeking a new location:

1. Louisiana has an independent board.
2. Requirements are a diploma from an Osteopathic College, with a three year course.

Members of the State Board

Dr. Paul W. Geddes, Shreveport, La.
Dr. H. A. Price, Alexandria, La.
Dr. T. G. Roussel, New Orleans, La.
Dr. Coyt Moore, Baton Rouge, La.
Dr. Henry Tete, New Orleans, La.

3. Examinations are held usually in October, February and July.

4. Fee for license, \$15.

5. Temporary permits granted until meeting of Board at discretion of the Board.

6. Louisiana license issued without examination to holders of license from other independent Osteopathic Boards (this does not include mixed Boards) of equal grade.

7. Examinations are fair and square tests, and *not catch* and *trick* questions.

8. We welcome all clean-cut, capable Osteopaths and will do all we can to further your success.

9. We have no Chiro's in Louisiana.

Any further information will be furnished upon receipt of a self-addressed stamped envelop by Dr. Henry Tete, Secretary Louisiana State Board of Osteopaths, 1117 Maison Blanche, New Orleans, La.

A NEW DEPARTURE

A State Association Bulletin

"Osteopathic Truth" has taken up the proposition with each state organization to furnish them with a Bulletin similar to this page. Each state is to have a page which will be edited by the Secretary or someone appointed by the Board of Trustees.

The states that have not, up to this time, been able to afford to have a bulletin will now have the opportunity of a medium whereby they may reach all the members at little cost. As partial pay

for the space, and it will be very partial in the small state organizations, the state organization or its individual members are to pay only the subscription price when the magazine trebles its size, and that subscription price will be but twice the present price. The whole plan is contingent upon at least half of the states or provinces accepting the proposition.

Keeping all the members of a state organization in close touch with what is going on throughout the State can only be done through a bulletin, and the regularity of that bulletin adds to its efficiency. Another feature of the "Osteopathic Truth" bulletins will be the fact that each state will know what its neighbor is doing to put Osteopathy on the map. This would be prohibitory for each state secretary to even keep in touch with all the other state secretaries, but the proposed plan will keep all the profession in touch with each other.

Not only will a "Solid South" accrue from this type of Bulletin service, but there will be a "Solid Profession" each in tune with the minor details which go to make the harmonious whole. Many of our differences have arisen from a sheer lack of knowledge of what our brother was striving to do in the county or town next door.

Co-operation between the Allies is winning the war, and it is co-operation between our practitioners that will win our war. Let each one of us introspect a little, then turn over a new leaf in the New Coming Bulletin, and make a resolve to give all we have and the very best, in spite of what the other people do or don't do.

Write your secretary or trustees about having your organization represented with a Bulletin.

DRINKALL.

Doctor:—If this page is marked with a blue pencil it denotes that we have this matter up with your Secretary and Board of Trustees. If you think your State should have a Bulletin, and you are willing to pay your share, \$2.00 for the year, then send that amount at once to your Secretary. If the required number of States do not join in the plan, your money will be returned to you. It is going to cost us far more than we will ever receive in return, but we are willing to co-operate by putting our money in if you are.—"Osteopathic Truth."

Osteopathy

O. O. Bashline, D. O., Grove City, Pa

"I was very much impressed by the article in the July issue written by Dr. Hubbell, hence this response. The Osteopath, individually and collectively, should take an invoice of his professional status and determine for himself his position and capabilities.

The truth of our science has been proven clinically and scientifically, and has withstood the blast of opposition. Osteopathy is a truth, a law, a science, and can never be absorbed or down-trodden, is living, and will continue to live. No one has done more to give our profession an excelleration of new life, new devotion and greater determination to our principles of right than Surgeon General Gorgas. A kick is always a boost. No one will question the sincerity of the Osteopath, individually or collectively, if looked at in the proper angle. Dr. A. T. Still gave us the seed and instructed us to develop the plant. We, his followers, are to give nourishment and cultivate the growth. Weeds in the fields will grow and necessitates the attention of the farmer. In removing them it produces strength in the farmer and proves the grower's ability and results in better crops. If we demand roses, we must cultivate them, which means expenditure of time and labor. Osteopathy is a growth. It is not mature and fully developed, neither is anything in science.

The future of Osteopathy depends upon the individual practitioner and his ability to develop himself in a unique manner so that he is capable of attending to all calls of distress. This is the only scientific method of treating disease. Being a science, it therefore has universal application and is in no way limited. Osteopathy has no limitations. It is the individual practitioner who may be limited and hence gives Osteopathy the limitations in so far as his personal endeavors are concerned. The charter of the American School of Osteopathy in part reads, "To improve our present system of surgery, obstetrics and the treatment of disease generally and to place the same on a more rational basis." Anything of scientific worth, that is or can be used as an aid or means in the treatment of disease, is of a right and ought to be part of the Osteopath's armamentarium.

A great many physicians of all schools condemn the practice of surgery. A great number of Osteopaths confine their practice to the treatment of chronic cases and refuse anything else that demands any attention outside of the office, or where surgery, local applications, etc.,

are and can be used as an aid in effecting a cure. The individual Osteopath thus places a limit upon himself in refusing to care for an obstetrical case or treating the acute infectious diseases. No one can deny that any structural irritation affecting the sympathetic trunks or terminals is not a lesion detrimental to body economy. If it is a necrosed tooth, cervical laceration, a hooded clitoris, a fibroid tumor of the uterus, a retroversion, a lacerated perineum, diseased tonsils, a diseased gall bladder beyond physiological repair, etc., they demand surgery. I deny the possibility of Osteopathic treatment ever curing a fibroid of the uterus, but it is part of Osteopathy to remove it surgically, because they all affect and irritate the pelvic plexus and thus produce disease and distressing symptoms. Sixty-seven per cent become cancerous. If all tumors of the uterus and breast were removed early, we would have very few cases of cancer. This may be said of tumors anywhere. It should be the general practice to remove all tumors when found, rather than the exception.

If Osteopathy is misunderstood, it is because of the lack of knowledge and progress of the individual practitioner. As physicians the public expects that we are qualified, capable, and willing to care for all ills and at all times. If it is the only scientific method of treating disease, why should they want anything else? If the individual practitioner desires to limit his practice, that in itself does not limit Osteopathy. We should have our obstetric, surgical and acute practice referred to another Osteopath who is capable and willing to do that work. Why should we permit our cases entering a medical institution for any character of treatment. If they are surgical cases, an Osteopathic surgeon should be procured to do the operation. We have our Osteopathic nurse. They are our greatest asset. Do our opponents send their cases to our institutions or employ our nurses? The action in Washington, D. C., should be enough. We cannot expect much if we limit ourselves and tell our clientele "That we don't treat acute conditions nor practice surgery." Instead of "we" the Osteopath should make it personal. Often people have remarked to me, "I am surprised to learn that you practice surgery and obstetrics. I did not know that Osteopaths did that, I thought they were like chiros." Then I try to explain to them the facts concerning Osteopathy, stating that my hobby was surgery and

obstetrics, and that our greatest and supreme results were in the acute field of practice. Osteopathic treatment alone, properly administered, decreased the mortality in surgery and obstetrics, and vastly more so in acute conditions.

Every time we permit our cases to enter medical institutions or to be operated upon by M. D.'s we are distributing medical propaganda. We become professional Huns, in the position we place our patients. In my experience and the experience of others in seeking financial help to establish Osteopathic institutions we get the cold shoulder 90 per cent because the average Osteopath is not conscious of general Osteopathic advancement and refuses financial aid to such institutions and is untruthful when he says "he is financially unable to help." To really advance Osteopathy, we must advance our institutions. Individuals cannot rise beyond institutional development. We should take an invoice of our relation to our institutions and note what help we are giving Osteopathy in directing our cases so that they can be kept under Osteopathic supervision. We need to train more nurses and then keep them employed in preference to graduates of medical hospitals. We thus efficiently promulgate Osteopathy to the laity. Most of us occupy the position we do because of Osteopathy and what it has done for us. We are too much like sponges, take in, but give nothing. A few cannot build hospitals and institutions and make them a success. If the individual D. O. lacks the co-operative spirit and does not help to boost the profession and institutions, he wrongly advertises himself and is a detriment to Osteopathic advancement. If any practitioner uses the X-ray, hydrotherapy, antiseptics, germicides, antidotes, etc., he certainly is no slacker so long as he backs his adjuncts with the real A. T. Still brand and knows a lesion and how to correct it.

We all have our faults, but if we take an invoice of our individual professional relation to our institutions and to each other, and note what little help we have given to Osteopathy, we will all be amazed. Good absorbers but not good boosters. If the individual D. O. lacks the co-operative spirit and does not help boost the profession and thus wrongly advertises himself and hence Osteopathy, it is no fault of Osteopathy. We are not idealists and never can be, individually or collectively, perfect; and since we are not, there is room for progress by all. Osteopathy and Osteopathic institutions will live and flourish because of the great laws of right and truth.