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Number 2

The Bulletin of



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TO THE



SCIENCE OF OSTEOPATHY

OCTOBER, 1905

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The Bulletin

OF THE ATLAS AND AXIS CLUBS.

VOLUME VI.

OCTOBER, 1905.

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DR. A. T. STILL.

"THE OLD DOCTOR."

ST. GEORGE FECHTIG, D. O., (M. C. O., A. S. O., '05.)

(This brief essay gives such admirable expression to the character of Dr. Still and is so worthy of being preserved in permanent form that we reprint it in full from The Right Way of Nov. 1904. Dr. Fechtig enjoyed a next-door neighbors intimate friendship with Dr. Still and has the unique distinction of being the first man to receive a three-year diploma in osteopathy.—Editor.)

When, in the fulness of time, men shall be measured by the standards men make for themselves, there will stand out far above the masses—with those other grand old men, Gladstone and Bismarck—one Andrew Taylor Still, until a few years ago practically unknown.

To-day, a tall, slender figure, slightly stooped as from the weight of many burdens, he wends his way as simply and naturally as the veriest freshman. A kindly word for all, a quick, impulsive smile and handshake, and he has gone—leaving behind him the feeling that it was good even to have seen the "Old Doctor."

But one can hardly realize, that in so apparently simple a man, could the seed have been born that has so grown and flourished as "Osteopathy." To look at that tall figure with the beautifully poised head,

the deep, widely separated, spiritual eyes, and the firm yet gentle chin bearded as in the early days—the man with staff in hand—brings to mind a picture of the Baptist John, “the voice crying in the wilderness.”

The protest against the old, the promise of newer, better things, better ways, how like, except in the ending—for Dr. Still is one of the few great teachers or preachers who have lived to see their theories put into practice, or to themselves enjoy the fruitage from their planting.

His early efforts, his trials and successes, are now too well known to require repeating. By overcoming, he became strong, and to-day his child, Osteopathy, has grown to gigantic proportions and is encircling the globe. He is essentially a man of one idea.

The vein he struck thirty years ago he has continued to work, and in that time he has enriched the earth more than all the mints of all the governments.

Dr. Still has been criticised about his carelessness in dress. What does the woman who has been hours in labor, with the dreadful thought of operation hanging over her, care that he is not clothed as other physicians are?

Can he unlock the structure so that the foetal head may pass? Can the child be saved? These are things important, and grateful women all over the length and breadth of the land, helped by his followers, are singing his praises.

If Dr. Still had made no discovery except in connection with obstetrics, for all time would his name be blessed.

It is necessary to know Dr. Still to appreciate his character. His presence in the class-rooms, when he comes in in his inimitable way, is usually greeted with rounds of applause, and the nuggets he gives in his few minute talks are the treasured of all the students. His knowledge of anatomy is marvelous and often he can tell exactly on what page of what edition of Gray certain things may be found. And points in physical examination that escape all others pay tribute to the Old Doctor's genius.

He likes his little joke, and says now that he is a Home-o-path, only practicing around home a little. But he is always glad to give advice to doctors who have gone forth into the field.

The Doctor's general health is good and we trust that he may be spared through many years. But when the final summing up shall come, to whom will the earth yield most grateful homage?

To him who in his ambition for power crushed his fellow men in his iron grasp, or to the simple country doctor who has made life easier for countless millions?

The monument in the hearts of the people to Andrew Taylor Still will endure forever.

DOCTOR CLARK'S CORRESPONDENCE.

M. F. CLARK, D. O.

Professor of Gynecology, Obstetrics and Applied Anatomy at the A. S. O.

(Quite as valuable as any article to all readers of the Bulletin will be found the letters from the field and Doctor Clark's replies. They take the practitioner back into the lecture room and clinic, and are as interesting as they are instructive.—Editor.)

Puerperal Insanity.

A friend expressed wish for me to examine a friend who became insane about a week after child birth. I write to learn whether you or Dr. Charley Still have had such cases and where lesions were found and what results under treatment.

Puerperal insanity not being discussed in my osteopathic books, I am anxious for their sake to give them encouragement for an osteopathic examination.

They have good physicians, and an expert from an asylum and they say it is unusual as no complications are apparent and they are keeping her partly quiet by drugs.

No insanity is found in family; an unusually happy woman. Had one child before, but dead. Married eight years. This lady was formerly Mrs. McKinley's nurse at Washington, now Mrs. Burton.

At this writing am unable to learn much of her symptoms, but will appreciate any points or data you can give as I may have opportunity to use it in a very few days.

MY DEAR DOCTOR:—Your letter at hand and in reply will say that I have treated several cases of puerperal insanity and have had the good fortune to have seen other cases treated especially by Dr. Charlie. In practically all of the cases seen by me there was some form of uterine disorder such as an acute displacement or partial inversion. In most of such cases, the third stage of labor was improperly handled, that is some traction was exerted on the cord or something else done that caused a dipping in of the uterine wall. By introducing a very large blunt sound this wrinkle or fold can be removed. In all such cases see that the uterus is in normal position and condition. The prognosis in the case you mention ought to be good.

Sciatica with Pregnancy.

Will you be so kind as to let me know immediately if you think I am safe in using the regular methods of treating sciatica in a case of pregnancy—fifth month. Have treated the patient nearly two months with a slow but gradual improvement. I am getting a little worried over it now, having expected it to yield rapidly.

I have found the usual contractures—especially of the muscles attached to the coccyx—these I am relaxing by a rectal treatment, but I can find no slip in any of the bones.

The same trouble was experienced during a former pregnancy. Would you advise me to continue treating the case, and if so please state as nearly as possible what to do and what to avoid.

It is a case which will mean a great deal for or against osteopathy in this town and I do not wish to take any unnecessary risk.

DEAR DOCTOR:—Your letter pertaining to the treatment of a case of sciatica complicating pregnancy, just received. In reply will say that it is certainly advisable to continue the treatment. In all probability the sciatica is due to pressure of the gravid uterus on the roots of the sciatic nerve and by changing its position the pain ought to be relieved. In most cases there is some displacement of the innominate bone on the affected side which is the real cause. Unless the treatment is given too hard it will in no wise produce any bad effect, but if you should cause a shock, miscarriage may result.

The thing to do is to correct all lesions of the pelvic bones and the lumbar articulations. The thing not to do is to treat too hard, that is produce much pain or shock.

Uterine Tumor.

Would you kindly advise me in the following case?

Lady, forty-three years. Fibroid tumor of uterus. Tumor is hard-nodular. Size of an egg or larger. No indications of menopause—flow profuse—lasts six to seven days and is increasing in amount. Single lady and had to rupture the hymen. The treatment has helped her general health some, but can't control the train of reflex symptoms. Would you advise an operation or would the menopause come on and atrophy follow if treatment were kept up? Has had about three months treatment.

MY DEAR DOCTOR:—I believe that the treatments should be kept up for awhile longer before an operation is resorted to. If the tumor were larger an operation would be indicated but since it is so small I believe that you can control in a measure, the hemorrhages and the reflex phenomena. Try the case for a month or so longer and if at that time the symptoms have not disappeared in part at least, it would then be time enough to consider an operation.

Tape Worm.

How would you handle a patient who has tape worm? I have a patient who wants to take pumpkin seeds as a diet. How do you pre-

pare the seeds; if a tea do you boil the whole seeds? Have you ever used it?

MY DEAR DOCTOR:—Yours of the 12th at hand and in reply will say that in the preparation of pumpkin seeds to be taken as a vermifuge three or four ounces should be hulled and bruised and allowed to macerate for about twelve hours and the entire quantity taken. The taking of them should be preceded by a fast and followed by a thorough manipulation over and around the gall-duct and bladder.

I have usually relied on the manipulative treatment for tape worms and consequently my experience with pumpkin seeds is limited.

Stomach Disorder.

I have many cases where there is an extreme formation of gas in stomach and intestines—cases of years standing some of them—and results are so unsatisfactory. Do you know any treatment that will give at least temporary relief? I mean beside work on the lesions.

I have one case in particular that gives me much trouble. A woman, about thirty; married; history of ovariectomy nine years ago. Neurasthenia two years ago from which she has never recovered. Acidity and gas in the stomach is extreme. M. D.'s diagnosed the case as dilatation of the stomach and wanted to operate. There was a course of osteopathic treatment last year—two months—with benefit. Then several months in adventists' sanitarium without benefit. Little food can be taken (except milk) without a feeling of heaviness in the stomach and the formation of gas.

Lesions: Axis, right. Swerve to right in splanchnic region. Break between eleventh and twelfth; twelfth right rib down. There is a long transverse process on third lumbar, behind which this rib gets caught. I was able to get it out once, but from a little unusual work it went back again. Eighth and ninth left ribs are broken from the cartilage in front.

I have treated the case six weeks. The spine is straightening out very well.

The acidity was not affected at all the first month, as far as I could judge. For the last two weeks there has been no trouble from that source, although I do not know what the effect would be with ordinary food. She takes only milk, grapes, squab and a little fruit which sometimes hurts her and sometimes does not.

How would you treat the case? And is there any effective palliative treatment for that gas formation when the lesion cannot be removed?

DEAR DOCTOR:—Your letter relative to some cases of stomach disorder received to-day. In such cases it usually takes several months of consecutive treatment to get any permanent effect. The walls of the

stomach are thinned, secretions altered and the peristalsis lessened. The formation of gas is the result of the indigestion and this in turn is the result of poor secretion and lessened peristalsis. In treating such cases endeavor to prevent abuse of the stomach, that is restrict the amount of food and select such things as will rest the stomach as much as possible. As for the manipulation, see to it that there is a good connection between the stomach and the spinal cord and that the cells in the spinal cord are properly nourished. This is accomplished by correcting all lesions in the upper and mid-dorsal regions. Temporary relief can often be obtained by direct manipulation over the affected area by which the gas is either absorbed or condensed. Don't be discouraged if the cases do not yield in a few months of treatment since in all probability the patient has been doctoring for the trouble for many years.

TUBERCULOSIS.

S. W. SYLVESTER, D. O., CLEVELAND, OHIO.

(A graduate of A. S. O., and an enthusiastic Atlas man.)

Page after page has been written by the medical profession on this subject, and they are no nearer a cure than they were twenty-five years ago. There is hardly a thing they have not tried in the past twenty-five years to rid the world of this "Great White-Plague" and the disease still seems to defy them. Why? Our answer is that they are treating the symptoms instead of the cause. The Koch cure, a few years ago, was heralded as the great panacea for tuberculosis. Now it is the Beet Juice or "Soup" Cure, but these things will run their course in a few months and the patients will realize that they have only been experimented upon. These things do help for awhile, because they are tissue builders and the patient seems to improve under the treatment, but it isn't long till they pass over to the Great Beyond—with "heart failure."

The nearest they have come to helping any one in this dread disease, is by recommending plenty of out-door exercise, and a good wholesome diet. In this way nature has a chance, and, tending toward the normal at all times, there is a possibility of the patient getting well, by getting the impingement off the nerve supply to the lungs and bronchi this will make free the blood supply and the good blood kills the tubercle.

I believe, though, that sixty per cent of cases of tuberculosis, are allowed to become tuberculosis simply because the doctor makes the wrong diagnosis in the first place.

On the 17th of August I was called to see a young lady whom the M. D. who had charge of the case pronounced tuberculosis. It seems

that the young lady had had just such a time six years prior to this attack and the M. D. in charge at that time had pronounced it this dread disease, but treated the lady six months and said that he had cured her. At the end of this time she was able to take a trip to Europe and came back apparently well but with the thought instilled in her mind that she must be very careful for she was full of the tubercle bacilli.

At the time I was called I found the young lady in bed with a temperature of 102 2-5 degrees, her throat wrapped in flannel, and she had not been able to speak above a whisper for several days. The mother told me all about the history of the case and that the M. D. who was attending her said he could give them no encouragement, the bacilli had got into her throat and the place for her was Denver if she got well enough to stand the journey. Well, remembering Dr. Geo. Laughlin's advice to "let no one's diagnosis influence you," I made my own and pronounced it "Lobar Pneumonia." I found the lower lobe of the left lung, solid; in the upper lobe I found a very sore spot about three inches long by two wide. I told the mother that I thought that the M. D. was mistaken in his diagnosis, and was advising her out-door exercise when the place for her was in bed. They were loath to think as I did for they said the M. D. had had thirty years experience in lung diseases and ought to know. Any way they asked me to treat the case; not because they had any idea that I could do her any good but like a drowning person they were grasping for straws.

The osteopathic lesions were atlas and axis to the right and a posterior spine from the second to the tenth dorsal. The first treatment killed all the tubercle bacilli in the throat and cured it, so it caused no trouble since her voice was restored also. After the sixth treatment, she was able to come to and from the office, a distance of ten miles. She has taken sixteen treatments, and is nearly well. The M. D. who was treating her met her not long ago on the street, and pronounced the case a miracle, and the experience I have had in this case leads me to believe that the osteopath can cure ninety per cent of the so-called tuberculosis cases.

In treatment of this case, of course, special attention was given to the lesions, followed by a thorough general treatment. How often since I have had this case the words have come to mind a la Young. "You never know what you can do till you try." Money of course is a nice thing, but advancement of our beloved science ought to be our first thought, and if it is, it will be but a few years, that this dread disease will have no more terror to the osteopath than the measles.

CASE REPORTS.

Appendicitis—A. S. YEWELL, D. O., (A. S. O., '03.)

(The writer's description of his own case.)

Since leaving Kirksville, my experience in the field has been varied, as have had three serious attacks of illness; one of typhoid, one of remittent type of malarial fever, one of appendicitis and all with complications. From this last attack I have not as yet fully recovered. Was taken down with this complaint, Jan. 12th, and have been unable to resume my practice as yet. In all my sickness, I have given osteopathy a thorough trial and have found it all that it claims, and more.

My attack of appendicitis will interest you more at this time than any other cases.

I will say in beginning that I have tried osteopathy in an attack of this complaint before I had my attack, and had excellent results.

Was attacked very suddenly by a severe pain in right iliac region, pain so severe that I could hardly endure it, followed by the formation of a hard protuberance, or swelling of the appendix. There was inflammation extending to the ascending colon and contracture of the abdominal muscles on the right side. This condition lasted about seven days. The inflammation began gradually, extending along the course of the whole colon, then into the small intestine and into the stomach. At that stage I was unable to take any food into the stomach; so they resorted to feeding per rectum.

Peritonitis then set in with its alarming symptoms. This was of the diffuse form. The abdomen was fearfully distended, and tense as a drum. Fluid in the cavity caused great discomfort. In lying on side had to resort to the use of pillows under the abdomen for relief from the weight of same. An M. D. (an old play fellow of mine who made it a practice to come in to see me every day with the osteopathic physician) said that there was no hope of my recovering, but am glad to say that I am slowly recovering from this dread disease, and without the use of knife, drugs, or anything but plain old osteopathy.

Cause: Given by osteopathic physician, lateral swerve of lower dorsal and upper lumbar. Constipation dating from attack of typhoid, leaving a tender valve. Treatment: at beginning, first cold then hot applications almost incessantly; over the appendix, then over the whole course of the bowel. Spinal treatment, also abdominal treatment, from two to three times a day. After absorption of fluids from cavity adhesions followed but am glad to say they are practically broken up.

Bright's Disease—C. H. STEARNS, D. O., WASHINGTON.

Female, age forty-nine. Very energetic from childhood. Untoward symptoms began to develop during her climacteric, and Bright's disease remained, and her first intimation of a serious condition was an attack of lumbago, which refused to disappear. Symptoms amassed rapidly. Her people thought paralysis was to be the outcome. The lumbago was an actual weakness of the spine, there being present a kyphosis, which was as sudden in appearing as it was far-reaching in its effects. Area involved was from the 9th dorsal to the 1st lumbar, inclusive, the 11th and 12th ribs of right side dropped within the pelvic brim, muscles on this side tense, some pain on pressure as far as great trochanter. This case was of fourteen months' standing when first treated osteopathically.

There was increased amount of urine, very acid in reaction, pale in color, specific gravity 1.004, contained albumen and a flocculent mass with hyaline casts. For first five months of treatment, the urine on oft repeated examination showed presence of casts and low specific gravity; but as lesions were gradually reduced the urine became quite normal. Destructive changes arrested, the patient gained in general health until now she appears perfectly well. The first symptoms to disappear was an obstinate constipation, the lower segment of bowel being prolapsed, which in itself may have caused some of the renal symptoms—the retention of fecal mass, with its poisons, and its tension on fascia over renal vessels interfering through them with the kidney function. During the course of treatments, the recommendation of a milk diet and daily open-air exercise, when able, was strictly adhered to.

Chronic Gonorrhoea—CLYDE GRAY, D. O., HORTON, KANSAS.

This case is of a lady infected at the age of twenty-two. At that time she was working for an M. D. who treated her for nearly six months. Then she went to Dr. No. 2, a surgeon of renown, who treated her for a month and pronounced her cured. Doctor No. 3 was a venereal specialist, whom she consulted the same day as pronounced cured. He treated her for nearly six months more, giving her no relief. While with him the disease traveled to the ovaries where I found it August 21, '05. Up to this time the disease had grown steadily worse. After three treatments she began to rapidly convalesce. After the sixth she wanted to stop all treatments as she felt better than she had for years. Have given her eleven treatments and can discern no sequelae; her last menstrual flow being comparatively painless, and normal in quantity and consistency.

Conditions found: Straight spine; (consumptive spine) with irregularities throughout; eighth, ninth and tenth ribs on right side twisted; break at twelfth dorsal; posterior lumbar; break at fifth lumbar; innom-

inate forward. I treated the whole spine and ribs, opened up the bowels and kidneys, advised against alcoholic drinks; gave an alkaline anti-septic douche (per manganate of potassium 1-4000, or a rose-colored solution), to be used daily. Special attention was paid to the pudic nerve roots. Steady pressure over the sacrum was also used—with good effect.

Dr. O. E. Smith, of Washington, D. C., relates a similar treatment in a male subject in the April Bulletin, '04, page 35. I also relaxed abdominal tissues and worked over bowels for constipation and ovaries for congestion.

* * *

OSTEOPATHIC GLEANINGS.

Does the "Pop" Mean Anything?

(Points from two papers, the first read before the American Osteopathic Association; the second before the Greater New York Osteopathic Society.—Editor.)

W. J. CONNER, D. O., KANSAS CITY, (A. S. O., '96.)

The pop is a natural phenomenon and all normal joints may pop. The more elastic fiber in the ligaments the more easily the pop is elicited. It does not mean that you have set a rib or dislocated one. If you push or pull until you make a rib pop, you may injure your patient before you get the desired pop. If a vertebra is twisted, you will find it with the fingers, not with the ear, and you should be able to tell when it is correct by the same organ of special sense. As long as you work all the joints and muscles in the patient's body, making them pop, the longer you delay the time when you can give a scientific treatment.

CHARLES C. TEALL, D. O., BROOKLYN, (A. S. O., '99.)

Sound is an evidence of motion and you will not get sound without motion. We have all stood by the operating table and heard the pop as the head of the femur slipped into the acetabulum, and it meant something, too, for it verified the sense of touch to the fact that the dislocation was reduced. So in cases of hip dislocation, we admit the pop as confirmatory evidence of a perfect operation; does it require a very vivid imagination to believe that we ought to hear a sound when a vertebra or rib is slipped into its normal position? Why should we not have sound as an evidence of motion when the rib is dropped into the facets? In fact, how can you have sound from any other cause? It is positive proof that the lesion is being reduced.

We have had the experience of feeling the lesion move but not hear the pop, and not until we got the pop would absolute relief be forthcoming. That a joint can be popped at any time is a statement I believe to be hard to prove. That the pop is not always necessary to

bring about a cure I will admit, and there are those who do not believe in nor get the pop; but it is, nevertheless, a source of great satisfaction to have the sense of touch and the ear both satisfied. The pop I have described is impossible from a perfectly normal joint. To get the sharp pop mentioned you must have either the reduction of an actual dislocation or the breaking up of adhesions and stretching of contracted tissue about a joint.

How Obstruction Causes Baldness.

How rare it is to see a bald spot which has any of the rosy hue that is characteristic of health. Of course, there are people who are colorless and yet healthy, their skins being such as to hide the surface blood flow that must nevertheless be there.

But even in such persons, if bald, it will be observed that the top of the head is abnormally white. In anger, or during any other severe physical agitation, it may become reddened, even to excess, but under ordinary circumstances it lacks color. It is a fact which, we think, is seldom noted, yet it furnishes the real explanation of baldness when an individual is otherwise in health.

Of course a bald condition of the head may result from general ill health, the nourishment supplied to the scalp in such cases being deficient in essential elements, through failure of the blood making and blood purifying organs to do their work properly. These are a special class of cases, in which osteopathic treatment restoring normal action to the organs involved, proves very effective.

But baldness, when good blood condition and general health exist, is a simple evidence that there is interruption in the blood supply to the scalp. The blood vessels, or the nerves which control their action, are suffering directly from the very sort of anatomical interference for which the osteopath is always seeking.

It may seem odd at first to work on the neck to produce hair on the top of the head; but when we recall that the blood vessels on their way to and from the scalp have to pass through the neck and that there is no surplus room to permit of structural deviations, the correctness of the proceeding becomes apparent. A little pressure from misadjustment of the vertebrae or contraction of tissue, may be exactly the cause.

No osteopath unqualifiedly claims to cure baldness; for in many cases the condition has advanced so far that the hair follicles are no longer capable of resuscitation, even by the most perfect nourishment. But where this is not the case excellent results are secured by osteopathic treatment.—The Right Way.

A Reason for Everything.

There is no waste room in the body, and the osteopathic system is based upon the belief that there is a place for everything and that it is necessary for health that everything should be in its place.

It would seem obvious that the organs under discussion require a certain amount of room in which to work, and that if the body, through bad development or habit, attempts to make them get along in less space, such cramping is going to result in trouble.

Such conditions are frequently found by the osteopath upon examination of the patient. A sunken chest or depressed spine naturally indicate a decreased working space within, causing great discomfort and often presenting the symptoms of serious organic disease when no such disease exists. Many people labor along in fear of making the slightest exertion, lest they die of heart trouble, when an osteopath could show them at once that it is something else that is really the matter. And osteopathic manipulation, coupled with good breathing, never fails to put an end to such conditions.

Consumption.

W. B. KEENE, M. D., D. O., PHILADELPHIA.

The real causation of tuberculosis may resolve itself into two factors, namely:

First—A decrease in the number of white blood cells, or a lessened activity of those present.

Secondly—A weakened power of cellular resistance of certain tissues of the organism permitting the deposit and propagation of the bacilli.

The problem then confronting us is, what can be done to strengthen the resisting power of the organism and to increase the number and activity of the leucocytes? If these two conditions could be remedied, the number of cases would be greatly lessened and the death rate from actual tuberculosis greatly decreased.

In the consideration of these possibilities osteopathic science takes a somewhat different view from that taken by other systems of healing. It does not deny that the bacillus tuberculosis is present in the diseased tissue, but it has reason to believe that the deposit of the bacillus is but a secondary occurrence, and not the primary cause of the disease. A perfectly healthy living tissue is immune. Now, can we by osteopathic treatment bring weakened tissues to a condition of healthy activity?

Tissues that have been destroyed by the action of the bacilli cannot be regenerated, but it is possible to strengthen the unattacked tissues of the organ, so as to limit the further propagation of the disease germ.

During the past four years we have come in contact with a number

of cases of tuberculosis in its various forms and aspects, and each case has afforded quite individual and varied phases for study and investigation. Taking into consideration the short period of time and the limited number of cases, it is impossible to arrive at any definite conclusions as to the percentage of cures, in all stages of the disease, under osteopathic treatment. The results obtained in the comparatively few cases treated have been so gratifying that we feel encouraged to urge our brother practitioners to engage in special research and investigation into the prevention and treatment of this dreaded disease.

From the results of treatment, the following general statement is submitted:

Every case of incipient tuberculosis, i. e., where all manifestations of the first stage existed, including the presence of the bacillus tuberculosis in the sputum, has been apparently cured. It is advisable to use the term "apparently cured," as more time must elapse in order that the patients can be further observed before positive statements can be submitted. The assumption that these cases have been cured, is based upon a disappearance of the following manifestations, which were presented before osteopathic treatment was instituted. The bacillus tuberculosis which was present in all cases but one, disappeared entirely from the sputum, emaciation was checked, cough subsided, night sweats ceased, and all physical signs in the pulmonary tissues were abated. In nearly all of these incipient cases lesions were found in the splanchnic area, involving innervation to the gastro-intestinal tract, and every case showed some lesion to the vaso-motor area of the pulmonary structures.

In the more advanced stage, presenting more or less degeneration and destruction of pulmonary cellular tissue, with cavity formations, all manifestations of the disease disappeared, a healing of the cavities having taken place. These cases presented the characteristic barrel-shaped chest with depressed ribs.

Osteopathy Served Up to Medical Men.

W. A. HINCKLE, M. D., D. O.

"The work of the masseur is all good and valuable in its particular sphere, but it has neither the sphere nor the precision of osteopathy. What the engine wiper is to the skilled mechanic the masseur is to the scientific osteopath. Massage is to osteopathy what patent medicine is to scientific medication: a shotgun prescription without positive diagnosis or accurate prescribing. True, both osteopathy and massage are mechanical, and in that respect they are similar. Surgical operations and the reduction of fractures are also mechanical, but on that

account could hardly be classed with massage. Homeopathy and allopathy are both systems of medicine, yet one is the antithesis of the other."

"But we osteopaths are accused of claiming too much for osteopathy. Perhaps we do, but having repeatedly proven its merits, our judgment on the subject should be of more value than that of those who have not done so. To all such I can but reply in the words of Newton, who, when ridiculed concerning his theory of gravitation, said: 'Sir, I have investigated these things; you have not.'"

"Tho all the common diseases, both acute and chronic, both infectious and non-infectious, have been treated osteopathically with the most encouraging results, it does not claim to be a cure-all. If it possesses but one-half the truth claimed for it by those who know most of the subject, it would still demand consideration by every physician and would rank as the greatest contribution to therapeutics, for no other has so wide a sphere of usefulness."—Medical World.

What disease can be treated successfully by osteopathy?—E. R. BOOTH, D. O., (A. S. O., 1900.)

Let the reader recall the fact that every minute part of the body gets its nutrition from the circulating fluids, and every function of every part, be it ever so small, is controlled by nerves, and he will see at once that osteopathy is applicable to the treatment of diseases of all parts of the human body. In other words, if you can find any part of the body not supplied with blood and not reached by nerves, a diseased condition of that part only is not amenable to osteopathic treatment. Of course no sensible osteopath will claim that all diseases can be cured. In fact there are very few diseases that may not reach a stage beyond which a cure is impossible. Generally that stage can be determined by the careful osteopathic physician, but in some cases, he, in common with all others, may be mistaken.

The reader should not lose sight of the fact that most of the cases, probably 90 per cent., successfully treated by osteopathy have been cases in which practically all other methods have failed. Osteopathy has been so successful in curing the so-called incurable diseases that many of the best osteopaths claim they should not refuse to treat such cases, thereby removing the last ray of hope from the suffering, even though the chances of success are against them. A reliable osteopath is not apt to take a case unless he finds a condition that is liable to interfere with the normal nerve or blood supply to the part diseased. If he takes those in which he finds no sufficient cause, his work will be unscientific and the results necessarily doubtful.

Many think, honestly, that osteopathy is good for chronic diseases,

but cannot reach acute. By what principles of common sense or by what rules of logic one can arrive at that conclusion is hard to understand. Every one knows that the sooner a displacement or a fractured bone is fixed the better. Every one knows that the sooner an antidote is given for a poison, or the sooner it is removed, the better. Every osteopath knows that it is easier to overcome an acute attack of grippe and prevent bad after effects than it is to remove the complications so often found after the drug treatment of this terrible malady. The same is true of other acute diseases as well as grippe. The little fire just starting is more easily extinguished than the conflagration resulting from it.

It is hard to get people to understand these simple facts because the reverse has been impressed upon their minds from infancy. They honestly think they must "take something" for every ailment.—Osteopathic Year Book.

THE BULLETIN

OF THE ATLAS AND AXIS CLUBS.

ALFRED W. ROGERS, A. M., EDITOR.
MISS DAISY E. MORELOCK, REPORTER FOR AXIS CLUB.

Entered as second class matter, Oct. 12, 1903, at the post office at Kirksville, Mo., under act of Congress of March 3, 1879.

Readers of the Bulletin are urged to send the editor prompt notice of their addresses on making their first location, and on making any change in their mailing addresses thereafter. Only by doing so can the reader provide against loss of some of the copies.

When the Bulletin has been sent to the earlier address, through neglect to inform the editor of the change, the number may generally be secured by sending a stamp (within 30 days) to the postmaster of the place, with a request to forward it.

KIRKSVILLE, MISSOURI, OCTOBER, 1905.

EDITORIALS.

Value of Atlas and Axis Pins. There is no more "fetching" emblem of any society, whether that society belong to medical school, or college or be outside of both, than the pins of the Atlas and Axis clubs. In addition to their inimitable attractiveness and suggestiveness, they have the unique value of representing Kirksville, the A. S. O. and the "A. T. Still brand" of osteopathy. In addition to these points, those entitled to wear them represent the best in scholarship, character, and promise of success in the profession. Because the responsibility rests upon every member of the two clubs to maintain these high standards, it is not a light matter to wear these pins. The reputation for proficiency attained by Atlas and Axis practitioners has made these pins known as representing high standards in osteopathic practice all over the country.

Effort has been made to arouse a sentiment in favor of establishing branch chapters of these societies in other osteopathic colleges. If the same genius presided in the other colleges, who presides here; if we knew, or even believed, that the principles and practice of the science were being taught in other colleges as they are taught here; if we could know that high standards of character and scholarship would be represented by the wearers of the pins elsewhere as here, the objection would be reduced to the minimum. On the contrary, as to the points which concern the science, we know that in this school and in this environment, the teaching and practice of osteopathy are superior to the teaching and practice in any other school. Students now attending

this school from at least five other schools testify to this fact. Another strong testimony is that traveling men who see all parts of the country, in writing or telephoning for an osteopath, frequently specify that a "Kirksville graduate" only is wanted.

These things being so, if chapters of either society are formed elsewhere, how can the Atlas and Axis pins continue to represent what they have in the past? It is apparent that they can not. This movement is an ill-advised one. We hope that it will be nipped in the bud, and that all loyal Atlas and Axis men and women determine that these pins shall stand for what they have always stood for—high character, good scholarship and promise of proficiency and success among the students and graduates of the American School of Osteopathy.

A thrill of interest and gratification has passed among the students recently because of the information from Dr. Clark that his new book on Applied Anatomy will be ready for the next senior class. This is a book which will be welcomed gladly not only by the students, but by practitioners as well.

Need of Indexes. In osteopathic periodical literature there seems to be a lack of care in providing indexes which will soon be a serious detriment to students and busy practitioners. Indeed the value of our magazine literature, even at the present time, is less than it would be if every volume contained a full and sufficient index covering subjects and authors. It is easy to see how great would be the advantage to the physicians who bind the Journal of Osteopathy each year if articles once read could be easily found again and reviewed through the aid of a good index. We hope that this lack will be made good in our more important publications in the future.

The "Old Doctor." Dr. A. T. Still visited Denver at the time of the convention and Chicago early in September. In his talks before the classes he has spoken of his calls upon the osteopaths, has discussed osteopathic diagnosis and described his new invention which is to be used to assist in setting ribs and the shoulder girdle—the "thoracic brace."

Of the work of practitioners on whom he called he said that many are doing very fine work but took occasion to condemn in strong terms the work of some who give long and general treatments.

The doctor has had his thoracic brace before the classes and with a student as patient has shown the method of using it. Of its value he has said that "we shall now send you out as the best crop of osteopaths

ever raised, because we know now that we can do with absolute certainty what before was problematical and uncertain—the setting of the ribs." A few quotations from the doctor's talks:

"You can't swear by the medical text-books because the truth is not in them."

In medical diagnosis, "It takes just so many symptoms to make a name for a disease."

After describing how osteopathy aids nature to effect a cure: "I say bully for Nature; three cheers for Nature's success!"

"Name me any disease, I care not what, and we will find the cause by following the arteries and the nerves and finding the shut off."

"Why study symptoms in foreign text-books? Why can't America with all her bright men write her a new symptomatology?"

"Whenever you see a man come to you and rub, his head needs rubbing."

"I never have treated a case of asthma the fourth time, Before that he has gone off well."

Definition of Osteopathy: A system of drugless healing based upon a thorough knowledge of anatomy and physiology, which aims, by mechanical manipulations, to aid nature in restoring to the human body its normal condition of structure and function.

A twenty-four page supplement to the June Bulletin was issued during the summer and is still on sale at Cooper's book store. This contains the articles on Heredity by Prof. C. H. Hoffman and on Compared Therapy by Dr. Baughman. The price is for single copies, five cents; \$3.50 per hundred.

BOOTH'S HISTORY OF OSTEOPATHY.

Osteopathic practitioners and students should procure the only complete and comprehensive work that has thus far been written outlining the history and development of osteopathy: History of Osteopathy and Twentieth Century Medical Practice, by E. R. Booth, Ph. D., D. O. The profession will be strengthened by the publication of this book and osteopathic literature much enriched by this addition. The book is fortunate in its author, for Dr. Booth was for many years a leader among educators. The author is fortunate in his subject and has shown his capacity to find the material to illuminate his subject and to present it in an interesting manner to the reader.

Appropriately the frontispiece is an excellent likeness of Dr. A. T.

Still, to whom also the book is dedicated. To the profession at large, as well as to the "Old Doctor" and his friends, it is highly gratifying to have this excellent and important work appear during his lifetime.

A most interesting section in Chapter I, devoted to a review of the life of the founder of osteopathy is the author's description of Dr. Still's insight into the mechanism of the human frame ascribed to clairvoyance and telepathy, a gift inherited from both sides of his family. Many interesting photographs of Dr. Still appear in this chapter, which closes with an equally interesting collection of his characteristic wise sayings.

In succeeding chapters the author deals with the development of osteopathy, the schools, literature and legislation, the relation to the medical profession and to the people. In several chapters containing a mine of condensed information, the landmarks in the history of medicine are shown and osteopathy is given its proper setting as a new scientific development through the discussion of such methods in therapeutics as the Lorenz treatment, massage, electricity, and hydrotherapy. The concluding chapter discusses the principles, practice and scope of osteopathy. The author's confidence in the future of our science is shown in a sentence in the preface in which he says that "he expects to live to see the day when not half a dozen physicians who value their reputations will dare raise their voices against it."

We have intentionally omitted to give in this review any extracts from the book. If we have written enough to show the spirit and scope of the book and to induce the Bulletin readers to own the book for themselves, our purpose will have been accomplished. The book is well printed and bound, contains forty illustrations and an index, which is a helpful and valuable feature of the work. Osteopaths would do the profession a valuable service by using their influence to have this history placed in the public libraries of their towns.

ATLAS NOTES.

Doctors Dobson, Clark and R. E. Hamilton attended the club meeting Sept. 23d. They each spoke on the work of the club in hand and their presence and advice was appreciated by the men. We should like to have their visits more frequent.

Prof. Dobson delivered a very interesting address in Memorial Hall, Sunday, Sept. 17th, before the Y. M. C. A. and Y. W. C. A. of the schools. His subject was, "The Measure of a Man." The influence of the Dean and others of the faculty, in these addresses before large audiences made up of the students, is far-reaching for good, for the influence of religious activity acts as a toning force and a restraining force in the moral life

of a large school where necessarily there must be tendencies to evil as well as to good.

Dr. Charles E. Still and Prof. Clark visited the club at the meeting of September 30. After making earnest speeches on the work and prospects of the club they went home with the feeling of satisfaction that their good work had ameliorated the anatomical abnormality, and everything seems to show that the functioning hereafter will be normal; that is, in a word, the will of the majority shall prevail.

Ten men were initiated October 7, men of maturity, strong character and good promise. We believe that they will be pillars of strength to the club.

Mr. George Francis Horn is a native of La Fayette, Indiana, from the high school of which place he was graduated. He has had a business career, principally as clerk and cashier and for the last twelve years has been in the Merchants' National Bank of La Fayette. He became interested in osteopathy through successful treatment of Mrs. Horn and of her mother.

Mr. Cyrus J. Gaddys comes to us from Valparaiso, Ind. He has had educational training at the Normal school, San Jose, Calif., and at Orleans College. He was a teacher for six years and, for eight years following, general agent for the firm of Powers, Higley & Co., dealers in educational specialties. It was through interest aroused during a business trip to Kirksville that he was led to investigate osteopathy and to adopt it as a profession.

Mr. Louis R. Fechtig is a brother of St. George Fechtig, D. O., (A. S. O., post-graduate Feb., '05.) He came here from Aspen, Colorado. He has had a business education and career, having been before studying osteopathy, a railroad agent. He came east to see his brother who was under treatment for heart trouble and upon investigation decided to study osteopathy.

Dr. William J. Wolfert has come here to take the post-graduate course, after having graduated from the Philadelphia College and Infirmary of Osteopathy. Dr. Wolfert has had a musical education in addition to his professional training, his favorite instruments being the violin and the trombone. Before studying osteopathy he was in the manufacturing business. Results of osteopathic treatment seen in his

own case and others of his family turned him toward osteopathy.

Mr. Frank Holmes comes to us from Elgin, Illinois. He was a machinist previous to taking up the study of osteopathy to which he was turned by a long and growing dissatisfaction with medicine.

Mr. William Floyd Chappell has been a resident of Williamstown, Mo., where he has been in business as a general merchant. His education has been obtained in normal school and business college. He was turned toward osteopathy by being cured of pneumonia and by the advice of practicing osteopaths.

Mr. Robert M. Eckels comes from Roanoke, Va., where he was auditor of the Norfolk & Western railroad. He was induced to study osteopathy through the advice of Dr. Chas. Coster of the A. S. O.

Mr. William H. Wakefield of Oakland, Calif., after studying two

years at the University of California engaged in business as a fruit shipper. He was led to study here through the advice of a sister, Etta C. Wakefield, D. O., (A. S. O., '03.)

Mr. George S. Smallwood has come here from Brooklyn, N. Y. He received his education in the public schools and business college and has been a commercial traveler. Notable and rapid return to health through osteopathic treatment caused him to take up the study.

Mr. Heber S. Arnussen is the youngest of the sophomore delegation. He comes to the A. S. O. from Logan, Utah, and adopts osteopathy as his first choice of a profession.

ATLAS FIELD NOTES.

Two Atlas men, Dr. J. F. Stephens of Dillon, Montana, and Dr. John Rieger of Red Lodge, have just passed successfully the examination of the Montana state board of osteopathy. Hitherto Dr. Asa Willard has been the only Atlas man in the state. Dr. Willard has just been elected for the third time president of the Montana Osteopathic Association, and delivered an address on "Increased Recognition of Osteopathy; Duty of Practitioners to Public, Profession and Self." Dr. Rieger presented reports of cases of epilepsy.

Dr. J. A. E. Reesor of Toronto, Canada, is taking a vacation of a few months among the Canadian Rockies at Laggan Alberta.

Dr. Melroy W. Easton and wife of Oil City, Penn., have been visiting the doctor's parents at Galatin, Mo. He spent a day at the school and showed much interest in the welfare of the club and the Bulletin. Dr. Easton is the solid, earnest type of man whom we are always glad to invite to call again.

Dr. L. N. Pennock of Norborne, Mo., has been visiting the school for rest and treatment during the month, and attended the club meetings. He has been "run down" for some time from overwork.

Dr. C. C. Teall, ('99) of Brooklyn, has been taking a trip up the Mediterranean during the summer, while another Atlas man from the same section, Dr. Charles Hazzard, ('97) of New York City has been spending his vacation period at Panama.

Dr. Henry S. Bunting ('00) has had the degree of M. D. conferred upon him by Harvey Medical College. It is now—H. S. Bunting, A. B., M. D., D. O. That sounds right and is right. The more education, the broader the man. Our profession needs three or four thousand more examples of this broad culture. Dr. Bunting visited the school Oct. 5 on business connected with the New Year Book and made a good speech at the afternoon clinic.

Dr. C. M. T. Hulett ('97) delivered the address in June at the graduating exercises of the Atlantic School. This was the last graduation, as the school has since ceased to exist. In the same month Dr. Charles E. Still ('94) addressed the students at the American College of Osteopathic Medicine and Surgery, Chicago.

Dr. Harry M. Still ('94) with Mrs. Still and children have been staying in town for several weeks. The latter have also been visiting at Humansville, Mo.

Dr. Harry M. Vastine ('00) of Harrisburg, Pa., has been making a September trip through the Yellowstone Park. Dr. Vastine is one of the trustees of the A. O. A.

Dr. Joseph F. Harwood ('04), after a location of many years, in a successful law practice and afterwards as a practicing osteopath, at Kansas City, has removed his office from that place to Lexington, Mo. Associated with him in osteopathic practice is his wife, Dr. Mary E.

Harwood (Axis '02). He also has a daughter who preceded both in the practice, Dr. Irene Harwood Ellis, (Axis '98) of Boston.

After reading the report of Dr. A. S. Yewell's case of appendicitis, all will have the deepest sympathy for one who has had one sickness after another for two years so that he has scarcely been able to engage actively in practice. We hope that Brother Yewell will not only have better health in future, but soon have a lucrative practice. Dr. Yewell has recently opened offices in Owensboro, Ky.

Dr. Arthur S. Bean, N. Y. City: "I am interested in the good work of the Bulletin and club and note with interest its progress. My work is pleasant and I am glad I am an Atlas D. O."

To Dr. and Mrs. E. R. Ryerson of Lincoln, Nebraska, was born, Sept. 19, a daughter, Ramah Russell Ryerson.

Dr. J. W. Tarr, Cloquet, Minn.: "The examination in Minnesota covered fourteen subjects and was fair in every respect. A fellow who has taken the work at the old A. S. O. under such men as Doctors Clark Link, Dobson, Young, Geo. Laughlin and Gerdine would have no right at all to fail.

My practice here is very good, am getting new converts all the time; but the trouble is the old chronics of from ten to twenty years standing, want to be cured too quickly."

Dr. George W. Riley ('04) of New York City will deliver an address before the state convention to be held at Albany, Oct. 25th.

Dr. J. W. Sylvester, Cleveland, O.: "If you knew how many hearts you made glad with the dear old Bulletin, it would make you feel good. To me it seems just like a visit to you boys. * * * Give my love to all the boys and tell them I always think of them and the dear old club every meeting night. My best to Drs. Dobson and George, and those of you whom I have never met, I love just the same because, boys, you belong to the best organization on earth. God bless you all."

"Drs. W. R. and Isabel Laughlin take pleasure in announcing to their friends that they have opened offices for the practice of osteopathy in Rooms 508-509 Fay Bldg., Los Angeles, California."

Dr. Edwin A. Montague (A. S. O., '03) of Eureka, Calif., was married Sept. 28th to Miss May Richmond of the same place.

* * *

Dr. C. E. Willis, Pittsburg, Kansas: "I wish to say to the members of the club that the practical knowledge gained in the Atlas Club is a great help to me in my daily work. I shall always think of the Atlas Club rooms as the place where the best students have their best times. Long live the Atlas Club."

* * *

Dr. Thomas L. Lewis writes that he "is doing a nice business and has ever since locating," at Rock Hill, S. C. He sends best wishes to the club and its members.

* * *

AXIS NOTES.

The Axis Club has many creditable women in the field. Women capable of writing instructive articles. We are calling upon some for contributions this month and expect to call upon others in the near future, so get your pens ready, don't be selfish—give us the benefit of your experiences. They may seem little to you but to others, they might mean much. There are many things to write about aside from case reports although we are always glad to get them.

* * *

The local chapter is not being overshadowed by the existing Sororities as is evidenced by the fine material with which we will acquaint the field members in our next issue.

* * *

We know that our field members are loyal because they have been instrumental in sending us some of our recent candidates. We are glad that your hearts are still beating warmly for us.

* * *

The old question of organizing chapters of the Axis Club in other schools is being again agitated. Girls in the field please, let us know your opinions in regard to the question.

Many of the field members have expressed a desire for a big Axis rally at Kirksville in June. The local chapter is making big plans for it and expect to perfect a permanent national organization at that time. Graduate members, begin right now to make your plans to be here.

* * *

We are indeed sorry that we forgot to mention the arrival on July 5th of Eunice Rose, the little daughter of Mr. and Mrs. Frederick J. Eimert.

Addresses corrected: In the future, M. M. Larsh will be at Laikow, Burma instead of India as stated in last issue.

* * *

Dr. Ethel Louise Burner at Bloomington, Ill. Dr. Mary Bawden from Centerville, Iowa, to Sioux City, Iowa.

* * *

Dr. Lena Prater is in New York prospecting.

* * *

The friends of Dr. and Mrs. Schmidt of Danville, Ohio, will be sorry to learn of the death of their baby girl. Mrs. Schmidt was at one time president of the Axis Club.

* * *

We regret very much the serious illness of Miss Boyce of Trenton, Mo. She has been ill for eight weeks with typhoid fever but her nurse reports that she is slowly recovering. We sincerely trust that she will soon be well again.

* * *

Dr. Susan Balfe of Alliance, Nebr., tells us of one of her funny experiences. She was reducing a dislocated humerus. The bone went into place with a snap so alarmed the gentleman that he exclaimed "Somebody pray." Dr. Balfe informed him that if any praying was to be done, he must do it himself. Needless to say that the Doctor was willing to take the collection.

* * *

Miss Sadie Day, who was forced to abandon her school work last term on account of the severe illness of her mother, is with us again.

* * *

Miss Augusta Nichols returned last Monday from her home at Lews, Delaware.

* * *

Miss Sylvia Printy, initiated recently, came from Centerville, Iowa. She was a teacher of several years experience.

* * *

Miss Mary La Fonda Gable of Byesville, Ohio. Miss Gable is a Junior with a brilliant class record and is the fourth member of her family to enter the profession which speaks well for those in the field.

* * *

Miss Georgia Smith, a graduate of the Garden City, Kansas High School and later a teacher in the public schools of that place.

* * *

Miss Sarah Corlies Wardell and Miss Julia Johnson both of Asbury Park, New Jersey, came to use as Juniors from the Philadelphia School.

Miss Wardell is a graduate of the Chappaqua Mountain Institute, N. Y.
Miss Johnson is a nurse by profession.

Mrs. Rockwell has returned from a health resort at Asheville, N. C.
She assisted Dr. W. B. Meacham, who has an excellent practice there.
Her summer's work has made her very enthusiastic for she has seen
good results in the field.

Dr. Alice M. Patterson ('95) and daughter with friends have been
touring during the summer in England and France. Dr. Patterson is
one of the leading osteopaths in Washington, D. C.

"I am anxious to know how the dear "Axis" is progressing and
hope it may have every success."

DR. FRANCIS H. SINGER, Chillicothe, Mo.

At the Axis meeting of Oct. 11, Dr. Josephine Morelock of Lincoln,
Nebraska, gave a practical talk on certain conditions likely to be en-
countered by women practitioners in cities, and how a woman may save
her strength and back in treating.

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Medals, Trophies, etc. awarded Henry Moore at various Associations.