

VOL. X

NUMBER 8

The Bulletin
of



Atlas & Axis Clubs



DEVOTED
TO THE



SCIENCE OF OSTEOPATHY

APRIL, 1909

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The Bulletin

OF THE ATLAS AND AXIS CLUBS.

VOLUME X.

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OSTEOPATHY—WHAT IS IT?

R. E. HAMILTON, D. O., KIRKSVILLE, MO.

(Being a lecture delivered before the Atlas Club, Feb. 27, 1909.)

"Osteopathy. What is it?" It has been variously defined, and yet the question remains, what is it? what about it? The orator would say osteopathy is the science of all that is good in the healing of disease. Obviously all that is good in the healing of disease is not confined to osteopathy. Osteopathy should include everything which has been proved to be of value in the healing of disease. Yet, that sounds suspiciously like the definition the so-called "regulars" give to their practice; very much like it because they emphatically state in all of their works on the practice of medicine that the regular physician is not confined to any one method of treatment; that it is their privilege, right and duty to use everything which is known to be productive of good in the treatment of disease. Then, what is osteopathy? It seems to me that any system of practice, whatever it may be, must hold to this definition. This definition is not some one's outburst of enthusiasm, it is a fact that has been realized for years—that the physician should use everything which is best for the cure of disease. The question remains,—what is osteopathy, and if this is osteopathy, what is the regular system?

Hahneman (1755-1843) held that the practice of medicine, as then taught, (there were no sects in the practice of medicine in those days, and they had the definition which I have quoted that the practice of medicine includes everything which is known to be of value in the cure

of human ills) did not conform to the accepted definition and that everything of value in the cure of disease was not used. Hahnemann, working with many drugs, devised, what he called, a new system for the cure of disease with drugs. As you know, the slogan of the homeopath was then "Like cures like." In other words, give for the cure of a disease that drug which will produce symptoms like the disease produces, e. g., for irritation of the skin apply to it an irritant, and for fever give a drug which will produce a fever. To reduce the whole system to an absurdity has been the aim of the "regulars." They say if a man is run over by a street car to cure him run over him with a little red wagon."

In order to distinguish his system from that then in vogue, Hahnemann devised the term Allopathy and designated all those who wished to term themselves "regulars," allopaths, and called his own system Homeopathy. He contended that the medicines given by the allopaths produced symptoms contrary to the symptoms of the disease, while he claimed by his system to strike at the root of the matter by his drugs, producing symptoms like those of the disease. He claimed they treated symptoms. Osteopathy claims they are both treating symptoms and says get behind this and treat the cause. That is the great watchword in osteopathy—treat the cause. And if we are not careful, the other fellow will some day steal it.

Find the cause and remove it is the surest dictum in all osteopathic practice. I do not care whether you are a lesion osteopath or a masseur, if you study to find the cause of disease and remove it you practice osteopathy according to the belief of Dr. A. T. Still, on whom we depend for guidance in this subject.

The allopaths resent the term; many of them claim there is but one system of medicine and it includes every thing. They undoubtedly gave medicine for every condition and just as surely gave drugs as a matter of treating symptoms. If a man had a fever they gave an anti-pyretic; when he had pain they gave a narcotic. There was a regular system of medicine in the days of Hahnemann, no matter what term was given to it, and just as surely as Hahnemann's definition that "like cures like" homeopathy, in the time of Hahnemann, treated symptoms.

Medicine, however, has not been at a stand-still. There is no use talking about the hide-bound medical practitioners. They have been advancing. For example; nearly 100 years ago a learned council of physicians in Germany advocated very strongly that railroads, which were just then coming into vogue, should be compelled to build high stone walls on both sides of the track so that people watching trains go by might not have their brains addled thereby. Medicine has advanced more in the last seventy-five years than ever before.

Symptomatology was pretty well understood in the time of Hippocrates. He wrote the symptoms of a good many diseases which we can recognize to-day by his descriptions. Of course, it is better understood now than then and great advances have been made along other lines, and especially has a great advance been made along the line of the cause of disease; more so than the cure. All of the systems of medicine owe the "regular" system much in this line. There has been much research, much study. I do not wish to laud the "regular" system of medicine for discoveries they have made nor would I discredit the homeopathic system of medicine, because their advancement in the same time has not been so great, for the principle reason that the system of medicine does not affect the man who is practicing it as the man himself affects the system. I would not laud the regular medical profession for the marvelous discoveries of the past twenty-five years. It has been inevitable. They have controlled the hospitals and laboratories—practically the entire machinery of teaching—have been subsidized by great grants of money from various cities and from private sources and devoted exclusively to the study of these things. I say, no particular credit is due to any system for this, but to the men who have done these things should we give the credit. And while the whole thing has been done under the authority and direction of medical councils it has not even all been done by men having the degree of M. D. The greatest discoveries, especially in physiology, have been made by men who had the title of Ph. D. instead of M. D. and if they bear the title M. D. is it merely incidental to the researches they have made in attaining their degree of Doctor of Philosophy.

The medical practitioner of to-day, as did the medical practitioner of years ago, says that the practice of medicine is not allopathy, homeopathy, osteopathy or any other pathy, but considers his own anything that has been proven to be of value. That is a good definition—we must adopt that for ourselves. No system of medicine can rest successfully on one method, one principle. It is true we have a fundamental principle in osteopathy—what we call the bony lesion—but that is not all of osteopathy. It is a new thing which osteopathy affords to the relief of disease, but that does not mean that osteopaths shall throw aside as useless all the discoveries of the ages. So, we must include in our definition of osteopathy, what I said a few minutes ago—OSTEOPATHY IS THAT SYSTEM OF TREATING DISEASE WHICH AIMS TO REMOVE THE CAUSE OF DISEASE, believing that the normal individual is, when this cause is removed, able to take care of himself. The tendency of the human body is toward the normal, as has been proven by hundreds of

cases which got well of themselves; countless accidents where new sockets were formed for dislocated bones; new organs grown from remnants of old ones.

So what is the difference between an osteopath and a man who styles himself a "regular" practitioner? His definition is the same as ours, or the same as ours ought to be, and there are a certain few who try to hold to that definition. The real difference is this: the best educated osteopath searches for his cause of disease and uses the best methods he knows of to remove that cause. He depends quite largely upon his theory that many diseases are caused, either primarily or secondarily, by bony lesions. There is the fundamental of osteopathic practice and therein is one of the two chief differences between osteopathy and other practices.

There is another difference which is just as vital as the first: The osteopath does not give drugs internally, because they have yet to be proved valuable, in spite of the thousand years of drug giving.

The "regular" teaches mechano-therapy, and you will notice he teaches it more than ever since osteopathy came out; he teaches psycho-therapy, hydro-therapy and he embodies in his practice just a little of what Hahnemann-called homeopathy; he gives drugs internally, hoping thereby to control the activities of the human body; he treats symptoms; he still gives antipyretics—he knows he can reduce fever that way; he gives narcotics and he still gives hypnotics, and various other substances intended to control the activities of the body, believing he, on the outside, can better judge of what the body ought to do than all the heredity of the body can do to abort disease.

There are cases where external interference is undoubtedly of value. Of course, it is a question you will have to decide for yourself, largely, whether there is ever a case that internal interference by drug medication is allowable.

Another difference—and this will not apply to the old school any more than to osteopathy. The medical student goes into school and studies the physiology of the human body, the anatomy, the pathology and pharmacology—all of these by scientific experiment, and according to the dictum of countless, careful experiments. Then, when he has finished his two years of basic science work—basic principles—he begins his two years of practice and he finds that practice is very widely different from what he has just been studying.

Any man who has gone to medical schools, and paid attention, or even read medical text books, will notice variations between principles, as laid down in physiology and pharmacology, and the principles as laid down in his practice of medicine.

There are a few men who are beginning to take into consideration physiology, pathology and pharmacology in writing on practice. The first of these was Osler, and now there are others who are following in his footsteps. They are getting nearer a rational system of medicine than the others. They are even getting nearer in their writings than they have dared to do in their practice. The idea of giving this or that because Doctor So and So found it useful, whether it is in truth or not, has been so firmly ground into the medical profession it seems almost impossible to get away from it.

We read of medical miracles—they are happening all the time. That is not much of criterion, for people get sick, and people get well whether they have medical attendance or not. There is much that the physician can do. There is much, that from the very nature of the thing, he cannot do, no matter what system he represents, and when you go out to practice osteopathy and you fail in a case you thought you were going to cure, do not get discouraged and think that the other fellow knows lots about the business and that you do not. He has had the same experience you have. He has lost cases he thought he was going to cure and cases he thought were going to die will come up smiling and tell him he guessed wrong.

We are getting more and more knowledge of the human body and how to take care of it, but unfortunately for the practice of medicine, the problem of disease that you confront is not a plain case of pneumonia or a plain case of typhoid fever—it takes into consideration a hundred factors, the condition of the blood and organs, the excretories, lungs, heart and all parts of the body which influences disease. The mind, also, must be taken into consideration as it, too, influences disease. All of these things make the problem so complicated it is little wonder that in a thousand years of experimenting we are beginning just now to learn what disease really is. The last ten years has thrown more enlightenment on the cause of disease than any fifty years did before. It is your province to take advantage of that.

It has not, necessarily, been osteopaths who have discovered all of this. Osteopathy has had its part, and other professions have had their parts, and because osteopaths did not discover all these things is no reason why you should not recognize the truth and grasp it as well as others; because you have something which you believe is better than internal medication is no reason why you should close your eyes to the scientific facts that are developed by the fellow who does use them.

Now, has osteopathy it's standard, and what is back of it? Why does the medical profession believe in benevolent assimilation? There

is just one reason why osteopathy has not been benevolently (?) assimilated, to a certain extent, already and that reason is that osteopathy bitterly rejects the vital principle of the "old school," which is internal medication, with drugs.

In spite of the definition that the "regular" has if you take from him his internal medication, he is left without a great deal to stand on, although surgery has made great progress in late years, and preventive medicine has made great progress; but if you take away from the regular practitioner his pill, whether it be bread or poison, he cannot hold his patient, and for that reason the "old school" has not been able to assimilate us as they did the homeopaths. There are more students in osteopathic schools right now than in homeopathic schools and more osteopaths in many states than homeopaths.

Some day it is barely possible that this osteopathic profession may become lost by assimilation on the part of the regulars but I believe osteopathy is most too bitter a pill for the drug-giving practitioner to swallow. For that reason, osteopathy has not been, nor will it soon be, assimilated by the practice which controls the fountain-head of medicine, practically, of this country, and in the same way the fountain-heads of law and justice, as it controls absolutely the practice of medicine in the United States army and navy and other official life.

What will be the fate of osteopathy? It means eventually the survival of the fittest. If osteopathy is fittest to survive, it will survive.

I have one fault to find with osteopaths. A student wants to study manipulations the day after he gets off the train and he wants to get it "by heart" so he can give one kind of a "punch" for one rib and another for the one next to it. He wants to learn those things so he can work on without thinking about it. Then he wants to take his patient and apply his peculiar knowledge, or some man's lectures, directly to that patient, not considering that every patient is a problem in himself. In other words, for lumbago treat certain of the lumbar vertebrae without taking into consideration what the cause of the lumbago is.

Since osteopathy is from Missouri it ought to be shown and you are the people to do it. It means hard work and hard study, but we ought to do it, since we are from Missouri, and since we are osteopaths—the "show me" people.

PACHYMENINGITIS EXTERNA.

L. A. BUMSTEAD, D. O., DELAWARE, OHIO.

The following is a report of a case of Pachymeningitis Externa which was cured by osteopathy after fifteen medical doctors, electrical apparatus, and in fact everything but osteopathy had been tried, and failed completely. The patient, a girl of ten years of age, had the following history:

In April, 1907, while recovering from an attack of pneumonia, the child fell and immediately complained of pain in the lower part of the back and of numbness in the legs. The family doctor prescribed medicine which "would have her out in three days," but instead, the child grew worse and remained in bed until after her course of osteopathic treatment. From the date of the injury until Nov. 28th, 1908, her treatment was entirely medical, excepting six weeks of electrical treatment, given at Grant Hospital, Columbus, Ohio.

At the time of my first visit I found her lying, by the doctor's orders, on a hard board covered with a blanket. She was fearfully emaciated, unconscious, moaning, evidently from pain in the spine, kidneys not acting, all of the flexor muscles of the body tense, the thumbs so tightly clasped by the fingers that the hand could not be opened, the arms drawn up to the chest and the legs drawn up so that the heels were tightly pressed against the hips, the spine flexed and the head retracted, bloody and foul smelling sputum constantly flowing from the mouth, pupils dilated and unresponsive to light. No food had been given, by the mouth, for seven weeks. Rectal feeding of olive oil and milk had been administered, upon the doctors' orders. On December 12th, 1908, the parents of the child brought her from her home, fourteen miles in the country, to Delaware and endeavored to place her in the county hospital under my care. Admission was refused on the grounds that a patient in her desperate condition should be in the care of a "competent surgeon" and only on such conditions would they receive her into the hospital. The girl was placed in a private home and the mother remained with her and together we pulled her through to complete recovery.

The lesions found were badly posterior third lumbar, anterior left innominate, lateral fifth dorsal. These were the most prominent lesions and results showed them to be the ones responsible for her disability. December 18th the first sign of returning consciousness was shown by a slight nodding of the head in reply to a question. In a few days hunger came and very small quantities of liquid food were given at frequent

intervals. Very soon the patient became ravenously hungry and the strength of mind and body grew rapidly. Great care was exercised in feeding the patient during convalescence. The flow of sputum gradually disappeared, but the teeth were loose and she showed all the signs of severe salivation. Steady improvement continued under daily treatment until February 17th, when I discontinued treatment, but kept the patient in town for a month under observation, but no relapse occurred. The only complication during convalescence was fever from alveolar abscesses, and tachycardia which was, doubtless, due to the great rapidity with which the child grew and accumulated flesh. The limbs gradually straightened out and locomotion became normal.

This case is one of the best examples of the success of specific osteopathic treatment I have ever seen. My treatment was confined to the lesions and at no time did I treat more than two minutes, except when trying to straighten the limbs in the later stage of the case. Improvement was marked after reduction of the fifth dorsal lesion. The spinal tenderness entirely disappeared and at the present writing the child is entirely normal in mind and body.

The medical diagnosis of the case was "Deep soreness of the spine." Pachymeingitis Externa seemed to me to be the best name to give the disease, but as the Old Doctor says, the name is not the important thing. "Find it, fix it, leave it alone."

THE BULLETIN

OF THE ATLAS AND AXIS CLUBS.

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DR. PAULINE R. MANTLE AXIS GRAND CHAPTER

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.

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KIRKSVILLE, MISSOURI, APRIL, 1909.

EDITORIALS.

Remove the lesion.



Adjustment is the password to osteopathic success.

Abnormal functioning means structural defect; structural defect means abnormal functioning.

Nature, the Great Physician; the osteopath Nature's chief assistant!

The human body our great machine autonomic, marvelously constructed by the Master Mechanic, the osteopath the Engineer!

Club Reunions at the A. O. A. Convention.

I have been requested by the officials of the American Osteopathic Association to communicate with all Class Societies, Fraternities, Alumni and other osteopathic associations, calling their attention to the fact that a certain time will be set aside at the 1909 convention in the Twin Cities for Class, Fraternal and College reunions.

It is the earnest wish of the A. O. A. to make these reunions a big

feature of the convention. To insure its success a member of each society (preferably the President or Secretary) should act as Manager to get his class or society together, communicating with each member and booming the reunion thoroughly.

As presidents of the Atlas and Axis Clubs, will you kindly take charge of the reunion of those societies. If you have active organizations and officials, of course this work should be done by them, and we would like you to get in touch with them and carry the work along.

I will furnish you with a supply of circulars to send to each member, if you wish, and would like suggestions regarding the contents of this circular letter. It will have to be a composite letter for the members of all associations. How many copies will you need? Give me a sample of the letter you would send out.

Convention time is an ideal opportunity for the building up and strengthening of these societies, the only time in fact, that many of them can get their members together.

I hope you will take active hold of this matter, but if you cannot, kindly give me the names of a few of your members who might do so. The date of meeting has not yet been fixed.

Yours truly,

C. A. UPTON,

Chairman Annual Reunion Committee.

N. Y. Life Bldg., St. Paul, Minn.

The Legislative Situation. Osteopathy, legislatively, has been interesting this spring. In the legislatures of a number of states measures have been introduced looking to the betterment of the osteopathic situation in those states. Also, in several have been introduced bills designed, either directly or indirectly, at the osteopaths and their system.

Pennsylvania has been ground for one of the hottest and most closely contested fights of any of the states, this year. It will be remembered that Philadelphia is the home of M. Clayton Thrush, Ph. M., M. D., who read such a conglomerated tirade against osteopathy before the American Medical Association in Chicago last summer, also other medical men who have been prominent in the fight against the independent osteopathic boards, especially in that state. However, the osteopaths kept busy, and got a bill pass both Houses and signed by the Governor, which allows for an independent board, and regulates the practice of osteopathy.

Regulations for independent boards have been passed in North

Dakota, and Nebraska. The latest news from Illinois is favorable. We give here a clipping from the Springfield Register, April 15th:

"A measure authorizing the appointment of a state board of osteopaths with power to examine applicants on their qualifications to practice osteopathy was yesterday reported out of the house judiciary committee with a favorable recommendation.

The measure has been opposed by the state board of health and the regular medical practitioners."

This measure will have come before the House for it's final vote before we come from press.

Osteopathic recognition has been secured in British Columbia, osteopathic examination being provided for. Other states that are in the fight this year are California, Colorado, Massachusetts, Maine, Iowa, New Jersey, New Hampshire, Rhode Island, and Washington having passed a combined board bill.

The osteopaths in most of these states are to be congratulated upon the way in which they have fought for osteopathy, unadulterated.

ATLAS NOTES.

Life Membership in the Atlas Club Provided For.

The committee recently appointed to arrange some plan for life membership in the Club, after carefully considering the many phases of the matter, prepared and mailed a circular letter to all of the alumni members—except those whose addresses could not be obtained—asking for an expression of opinion on this proposition, as per plan enclosed.

The **prime object** of this plan is to prevent the loss to the Club of field members for the non-payment of yearly dues, and to give those already suspended for the non-payment of same, an equal chance with future graduates to obtain life membership.

Out of a fairly representative number of replies received, five—sixth were decidedly in favor of the whole plan, of the remaining one-sixth a few were opposed to the plan while some only partially opposed it.

The committee then drew up amendments to the constitution covering all points relating to the proposed plan, and submitted them to the local chapter for it's action. These amendments were adopted at the last regular meeting and are as follows:

Article IV, Section 12. The Investment Fund Board shall consist of five members as follows: Two active members of the local chapter, two field members, and one Atlas member of the Faculty of the American School of Osteopathy. The term of office shall be one year. The local members and the Faculty member, shall be elected in the

usual manner at the regular election in May of each year. The field members shall be elected by the local chapter at the same time, by the election of the two receiving the highest number of field votes, in a list of not less than ten field members submitted to the alumni by the local chapter.

The Investment Fund Board shall have control of the Investment Fund and it shall be their duty to exercise reasonable diligence in the conservation and investment of the same; they shall not make use of any part of the fund for any purpose other than permanent investment for Club House purposes without the consent of the local chapter. They shall make complete reports to the chapter when so desired by it.

Article VIII, Section 1 amended to read. All fees, dues and assessments paid in shall be for the benefit of the general fund; except twenty-five per cent of all fees received under Section 6 and Section 7 of this Article, which amount shall be placed in a special fund, together with all monies received from Bulletin advertising, from the Axis Club—as their portion of the publishing expense of the Bulletin—or from any other Bulletin source, which fund shall be known as "The Bulletin Fund." All bills of expense arising in any way in connection with the Bulletin shall be paid from this fund, after proper action on same by the club. Seventy-five per cent of all fees received under Section 6 and Section 7 of this Article shall be placed in a special fund known as "The Investment Fund."

Article VIII, Section 6. Graduate members, except those taking Post-graduate work and enjoying the benefits of the Club, and those not provided for in Section 7 of this Article shall be assessed not more than two dollars nor less than one dollar per annum, payable on or before Jan. first of each year, which assessment shall be for membership dues and subscription to the Bulletin. (See amendment to By-Laws below).

Article VIII, Section 7—1. Any graduate member, upon the payment of twenty-five dollars (\$25.) shall be granted a certificate of life membership in the Club and in addition thereto shall be entitled to receive the Bulletin during it's life, without further charge.

2. Any graduate member, upon the payment of ten dollars (\$10.) shall be granted a certificate of life membership in the Club and in addition thereto shall be entitled to receive the Bulletin ten years without further charge, and at the end of said ten years he shall receive the Bulletin upon the payment of fifty cents per annum, thereafter.

3. Any graduate member who shall wish to take advantage of paragraphs one and two of this Section, may do so upon payment of the amount necessary to fulfill the requirements of said paragraphs, pro-

vided that all yearly payments previously made by said member may apply on this amount.

Article VIII, Section 9. All monies received from the sale of any property acquired by the Investment Fund Board for the Club shall be returned to the Investment Fund.

By-Laws.

Article II, Section 3. The dues for graduated members, who shall take advantage of Section 6 of Article 8 of the constitution shall be \$1.00 per year. (This is the old plan.)

* * *

It will be noticed that this plan enables each field member to choose that feature of it which suits him best. Any member who does not approve of the new features, i. e., the \$25.00 and \$10.00 plans, can continue his membership in the Club, as in the past, by paying one dollar each year.

For the sake of simplifying matters the Receptaculum of the Club has been designated the treasurer of the Investment Fund, he giving suitable bond, and paying all properly authorized bills presented to him by the Investment Board.

The form of Life Certificate has not yet been selected, but will be done at an early date.

Those field members desiring to take advantage of the new features of the plan may do so at once by remitting to the Pylorus, who will receipt for same, and the Certificate of Life Membership will be sent as soon as they can be secured.

* * *

In printing the circular letter recently sent out Dr. Pratt's name was accidentally left out of the list of names of the members of the Life Membership committee. This opportunity is taken to correct the error, as he was a very important factor in drawing up the plans presented.

Signed LIFE MEMBERSHIP COMMITTEE.

* * *

We are glad to report that Dr. Warren Hamilton is much improved in health and has returned from a trip south, looking better than ever.

* * *

On Saturday evening, March 27th, the Club met in social session and the following program was rendered:

Piano Solo—Mr. McGonigle.

Reading—Mr. Cramer.

Whistling Solo—Mr. Grieves.

Case Report—Mr. Kerr.

Case Report—Mr. Kenney.

Case Report—Mr. Prescott.

All was enjoyed very much. We have a promise of the case reports, in full, for publication—and as they were all interesting cases we will be glad to print them. In this issue we give a report of the case reported by Mr. Prescott, who observed and treated for a time last summer, the case which was under the care of Dr. L. A. Bumstead, of Delaware, Ohio. Dr. Bumstead gives us a full report of the case.

* * *

On Saturday evening, April 10th, we were entertained by the following program:

Piano Solo—Mr. McGonigle.

Reading—Mr. Cramer.

Vocal Solo—Mr. Hollis.

Address—Dr. Geo. M. Laughlin.

Dr. Laughlin's address on "What Osteopathy Can do in Female Diseases," will be given, in brief, in next month's Bulletin.

* * *

We give, in this issue, a lecture before the Club Feb. 27th by Dr. R. E. Hamilton. The Doctor brings out some very vital points in regard to osteopathy, and other methods of therapeutics, treating the subject in a very able manner.

* * *

On April 14th, at the home of the bride's parents, in Bushnell, Ill., Dr. Franklin Fiske, of the A. S. O. faculty and Editor of the Journal of Osteopathy and the Osteopathic Journal, was married to Miss Ethyl McEilvain. After a quiet wedding they visited his mother at Lincoln, Ill. They will be at home on South Franklin St., Kirksville. We wish for them life's happiest reward.

* * *

The Club gave an informal dance on the evening of April 16th at the Club rooms. About twenty-five couples were present, notwithstanding the inclemency in the weather. After the dance refreshments were served.

* * *

To date, there have been fifty-six epiphyses permeate the internal periosteum of our grand skeleton, since the beginning of this school year. Not alone has the Club grown in numbers, however, but the lectures and practical work part of our life has been the part of most stress, and all classes, alike, have had good work. The practical work committees deserve especial commendation for the good work which has been furnished.

New Members.

Mr. Harry R. McLean, of Milford, Tex., became interested in osteopathy through the influence of Dr. J. H. Overton, of Dallas, Tex. He has a college education, taking the A. B. degree from Austin College, at Sherman, Texas; last year. He is a member of the 1912 class.

* * *

Mr. Roy M. Wolf, of Revere, Mo., was induced to study osteopathy from benefit received from treatment.

Mr. Wolf is a graduate from the National Business College, at Quincy, Ill., and was a student at the Kirksville State Normal School. He was later a traveling salesman, and is a member of the Freshman class.

* * *

Mr. Claude Wilson, of Olive Hill, Ky., was a bank cashier, was induced to study osteopathy through the influence of T. H. Sutton of Louisville, Ky., and upon investigation, has a High School education and has had two years in a Medical School.

* * *

Mr. Thomas L. Bennett, of Owensboro, Ky., is a member of the freshman class.

Mr. Bennett was General Freight Agent for the Louisville and Evansville Packet Co. He has two brothers in the profession who are Atlas men, Dr. C. E. Bennett, '03, of Pensacola, Fla., and Dr. J. W. Bennett, '04, of Augusta, Ga.

* * *

Mr. Wm. Barron Martin, of Parkers Landing, Penn., is a member of the freshman class, is a High School and State Normal School graduate and was a principal of public schools. He became a believer in osteopathy by observing cures wrought by it when other methods had failed, and by reading osteopathic literature.

* * *

Mr. Arthur Smith Hollis, of London, England, is a member of the freshman class. He first heard of osteopathy from the Esotone Fraternity, at Applegate, Calif.

Mr. Hollis received his education in the Highgate School and London University, obtaining the degree of Bachelor of Arts.

* * *

Mr. Alexander Harrison Smith, of Barre, Vt., is a member of the freshman class, is a High School graduate, and was induced to study by the result of the treatments on relatives.

* * *

Mr. Vernon H. Edson from Williamstown, Vt., is a member of the

1911 class. He was led to study osteopathy upon investigating the principles upon which its success as a healing art is based.

* * *

Mr. Geo. P. Smith, of Butler, Pa., was induced to study by observing the results obtained by the practitioners of our science. He has a Business College and Normal School education and was a teacher. He is a member of the 1912 class.

* * *

Mr. Charles Halladay Chandler from Independence, Kansas, is a member of the freshman class, has a High School education and was influenced to study by the benefit, derived by friends, from osteopathic treatment.

* * *

Mr. Don Clifford Crocker, of Beatrice, Nebr., is a member of the freshman class, was a real estate man, and secured his education in a High School and a School of Expression obtaining the degree of Bachelor of Elocution.

* * *

Mr. Thos. R. Thorburn, of New York City is a member of the freshman class, has a High School education and was a bank clerk. Mr. Thorburn became interested in osteopathy through the influence of Dr. Phil Spence of New York, who is an Atlas man.

* * *

ATLAS FIELD NOTES.

According to the arrangement of the Annual Reunion Committee of the A. O. A. there will be a time set apart for reunion of classes, clubs, etc., at the 1909 convention. It is desired by a number of the Atlas men that there be a reunion of members of the Atlas Club at this time.

Dr. C. A. Upton, Chairman of the Reunion Committee of the A. O. A., has a communication in this issue of the Bulletin. If the field members desire a reunion at this time please communicate with the local chapter at once. In the meantime the matter will be taken up in the local chapter and at least some steps taken toward making arrangements for this reunion. However, as this matter interests most especially the field members, it will depend upon you principally as to whether there will be a reunion of Atlas men at this time or not.

Such arrangements as can be made by the 15th of May can be printed in that issue of the Bulletin, as that will be the last issue of the school year. Other arrangements can be printed in the other magazines just prior to the meeting of the A. O. A.

We are in receipt of the following very unique card:

"A new squall has arisen on life's billows,

MISS MABEL WILLARD

Born Saturday, March 27, 1909

Will in the future make her home with her parents.

Dr. and Mrs. Asa Willard

Missoula, Montana.

* * *

Dr. Fred Bischoff, Atlas '00, of Waukegan, Ill., was a visitor at the A. S. O. and at the Club rooms, for a few days this month.

He reports things progressive in his part of the country, and that the legislative outlook was good at the time he was here.

* * *

Dr. N. A. Johnson, Atlas '06, of Fredonia, N. Y., was in Kirksville a few days this month. He brought a patient all the way from New York to the A. S. O. for an X-ray examination.

Although the Doctor has been out of school three years, he is still enthusiastic over the Atlas Club.

* * *

Dr. F. B. Fleming, Montrose, Colo., "I wish to report to you the arrival of a nine pound boy in our home on the 2nd of April. * * * Mother and son are doing nicely, the father slowly recovering. Best wishes for the welfare of the Club."

* * *

Dr. A. G. Hildreth, of St. Louis, has been appointed a member of the State Osteopathic Examining Board, by Gov. Hadley.

We are very glad to see Dr. Hildreth appointed to this position, and are sure that the Governor could not have made a better selection.

* * *

Dr. Edward B. Hart, of Pittsburg, Pa., writes very much in favor of the spirit of the Club as shown by entertaining the other clubs of the school. Also he speaks in favor of a Club house, having been on a committee to investigate that proposition, when in school.

He wishes the Club much success, and also wishes he could be here some Saturday evening to help "remove the lesion."

* * *

Dr. K. W. Shipman, Milwaukee, Wis.: "My regards to all the Club boys, with best wishes for your success.

If any of you want to get into a state where there is abundant opportunity for good protection, high standard, and a fine bunch of osteopaths look up Wisconsin. Will be glad to help anyone. Also write

to Dr. H. L. Noordhoff, Oshkosh, Wis., secretary of the State Association.

We have just knocked out a Chiro bill."

The Doctor is now located with Dr. Warren B. Davis, 302-306 Wells Bldg.

AXIS NOTES.

The editress must again call the attention of the Axis members to the fact that they each owe a debt to the Bulletin. Unless you can tell us something of yourself, or of other members of the Club who are out in practice, it is impossible to make this department of the Bulletin as newsworthy and interesting as it should be.

No doubt most of you glance through the Bulletin to see what has happened to field members, who were formerly classmates of yours, or to learn what is going on in the local chapter.

The latter can be supplied by the editress, but the former can be had only through the co-operation of the sisters in the field. The editress has written a number of letters to members who she thought needed only to be reminded of the fact that the Bulletin needs their co-operation, but in most cases did not receive even the courtesy of a reply.

We want to urge again on members to give us case reports, osteopathic anecdotes, or anything that has interested you, and which, no doubt, would interest others of the Club.

Now, may we depend on you to help us in the effort to make our department more newsworthy.

On the evening of April 9th Mrs. Mary R. Ewing of the 1909 class, presented the subject of the Emmanuel Movement in an address to the Club, after which Mr. Barnett sang a solo.

Mrs. Ewing opened her remarks with a short history of the Emmanuel Movement, originated by the Rev. Elwood Worcester, D. D., Ph. D., rector of Emmanuel Church, Boston.

While many of the audience were quite well aware of the Emmanuel Movement, and had, in a general way, a fair conception of what it is, Mrs. Ewing brought out in detail many of the points not generally known to those not having made a study of this movement. For instance, the belief is held by many that while neuroses, and other functional diseases are treated by the supporters of the Emmanuel Movement, it is not generally understood that no case of any character is treated psychically unless first diagnosed by a regular physician.

"Before any form of mental or nervous disease is treated, it is neces-

sary that the physician should have a clear idea of its origin, its history and its effect on the life of the patient. In moral and nervous disorders, such knowledge is not always easy to obtain. They are not discoverable by easy and simple tests, such as examining the tongue, feeling the pulse, taking the temperature, etc.

The patient may have a motive in misleading, or at least in not enlightening, the physician as to the real cause of the disorder. It may have originated in some painful moral experience or habit, which the patient finds it hard to disclose. Confession may involve the safety and happiness of others. In dealing with such cases gentleness, sympathy, and tact and an abundance of time are necessary.

That is one reason why the majority of physicians do not care to treat nervous patients. They are great consumers of time, and unless the doctor's charges are uncommonly high, he cannot afford to take many such cases.

"There are certain emotions and feelings such as fear, anger, jealousy, and worry which are destructive to the patient. They affect the heart and action of the lungs, the process of digestion and assimilation. They enfeeble him, rob him of his sleep, and make him hate his life. The great problem is to eliminate these feelings, and the easiest way to do this is for him to live for something so great and so altogether desirable that fear and hatred cannot touch him."

We are in receipt of a cordial letter this month from Dr. Eva Mains Carlow, of Melford, Oregon, who graduated in the last June class.

Her first case was a boy of 10 or 12 years of age, who was found, by the doctor and her husband while out for a walk one evening, laying by the road side and when asked what was the matter, replied that he had chills and fever. Dr. Carlow examined him and found that the chill was past and the fever was high, the boy suffering from a severe headache. She asked why he did not go home and he replied that no one was there. On feeling the chill coming on he had started to one of the stores in the town that he might sit by the fire, but was unable to get there.

Feeling sorry for the boy the Doctor treated him, much to the interest of the bystanders who had collected. The boy began to feel better, and all at once gave a stretch, got up and walked away, without even expressing any appreciation for the kindness done him.

The Club is in receipt of an announcement that Dr. Rena Bammert has succeeded to the practice of Dr. M. S. McK'y, in St. Louis. Dr. Bammert is one of the club members, being of the class of '04, and was,

for sometime, engaged as night superintendent of the A. S. O. Hospital. We wish her unlimited success. Dr. McK'y has removed to Muskogee, Oklahoma to engage in practice.

* * *

Dr. Inez Wells, A. S. O., '06, has moved her office from Greenville, Texas, where she has been in practice for sometime, to Van Alstyne, Texas.

* * *

March 24th, being a social evening, was opened by a solo, by Miss Laughlin of the 1911 class.

The address of the evening was made by Dr. Pratt, his subject being "The sexual problem and the manner in which it should be presented to the young."

Dr. Pratt is always full of good thoughts; and his address once more proved this true. In his opening remarks he quoted from the address of President Elliott of Harvard before a meeting of the American Medical Society to the effect that the education of the modern physician should be along the lines of prophylactic measures rather than of remedial measures.

"This will be true in time to come, when you are in the field as physicians. You will make a name for yourselves and will be recognized as a power in your community; will draw from the people of the community's love, respect, and good will. It is a greater thing to keep an individual healthy than to cure him after he becomes ill. The physician should advise patients how to live in order to preserve health, rather than to take care of them after they become ill.

The factor of sex is the central factor in the life of an individual, and, particularly, does it become of value to a woman physician, because in her work there is probably no other line on which she will be more frequently consulted. And there is no other line in relation with which your advice will be of such value to your patient. That particularly is true concerning young girls, for the reason that for years and centuries the discussion of matters relating to sex has been kept dark. There is probably no one thing of so much importance that should be wisely dealt with by parents. They shun it because of some fancied shame that attaches to the discussion of the problem. The result is that where the young might be made aware of the facts appertaining to the subject without the slightest chance of robbing them of their innocence, there are numerous young girls to-day who are nervous, listless and cannot do their work well, have hollow cheeks and white faces, and are in that condition from ignorance. The start of it all is the lack of intelligent dis-

ussion by the parents, and, therefore, the extreme importance of this to you as physicians.

I say this advisedly, because of the position a woman occupies in her profession. She is peculiarly able to impart this knowledge to her patients because, the matter of education of the daughters devolves upon the mother. The mother will approach you a dozen times, where she will approach a male physician only once.

All children are curious and one of the early things that arouse their curiosity is, "where did they come from?" and sooner or later they will ask. Usually the child is dismissed and goes away unsatisfied; her honest questions have not been answered and she is led to believe that she has done something terrible if she ask these questions in the presence of company, which she often does. What is the result? She finds it out, she seeks it out some place else, consequently does not get the facts correctly.

One of the most important periods in a girl's life is from her 8th to 10th years. That is the time at which the child begins to inquire into such things as "Where does the baby come from?" If she is properly answered at that time it makes all the rest of the information easy.

There are numerous very excellent books on this subject, but unfortunately do not often get into the hands of mothers. These mothers may be patients of yours and will ask you how to approach her child. For this you must be prepared. It is the easiest thing in the world to arouse the interest of the child in almost anything at this age. She should be made aware that baby life is derived from parent life. That not alone does all baby life come from parent life, but each type of parent begets, in some way, the same type of baby. That is to say if you go into plant life, a new baby plant will be born and will follow in its development along the same line as its parent, will partake of the characteristics of the parent and is a part of it.

Explain to the child that the object of all life is two fold, that of sustaining life in itself and that of reproducing another of the same type and that the reproduction is the final end of all life.

* * *

New Members.

On the evening of the 14th of April, the club received into membership Mrs. Anna P. Edson, formerly a school teacher in Williamstown, Vermont, who was graduated at Goddard Seminary, Barre, Vt., in '04.

Mrs. Edson became interested in osteopathy through benefits derived from treatments, and to such an extent that she decided to take up the work and matriculated in the freshman class last semester.

Miss Bula Belle Cameron and Miss Harriet A. Hitchcock, of the September class were also received into membership, the former coming from Wahpeton, N. D., and the latter from Redfield, Kansas.

Miss Cameron was advised to undergo an operation by an M. D., but the intervention of osteopathy made it unnecessary, which interested her in the science to such an extent that she decided to take up the work.

Miss Hitchcock's sister was long a sufferer from sciatica, and had been treated for it unsuccessfully by a number of medical doctors. Osteopathy cured the case, and hence Miss Hitchcock was induced to enter the A. S. O.

* * *

THE ANNUAL MEETING OF THE GRAND CHAPTER.

The Grand Chapter of the Axis Club can hold but one meeting each year. This year it will be held at Minneapolis during the convention of the A. O. A. The date has not been fixed, but will be announced in the next issue of the Bulletin.

One evening of the great convention will be set aside for fraternity meetings and it is the earnest wish of the A. O. A. to make these reunions one of the big features of the convention.

This will be the first reunion of the field members of the Axis Club since our organization into a Grand Chapter and will be the only time we will have for getting our members together. Our program committee is arranging a pleasant and profitable meeting and we hope every member will take an active interest in the matter and arrange to be present.

One of the committees of the A. O. A. is a reunion committee and very soon they will send out a circular letter announcing the date of the convention.

* * *

The task of getting the list of members and revising it, getting up the letter and having it printed, folded, put in the envelopes, addressed and stamped has been no end of trouble. No doubt there are still errors in addresses because so many have been remiss in notifying us of their changes. One member wrote that she had not had her Bulletin this year, but had nobody but herself to blame for it because she had not notified the management of her change of address.

The members who have attended the annual meetings are the ones who are most alive to the interests of the club and it is hoped that so many will attend this year that the incoming secretary-treasurer will not have to send out a personal call for dues and that the general man-

agement of club affairs will be made easier by the awakening that a reunion gives.

* * *

WANTED!

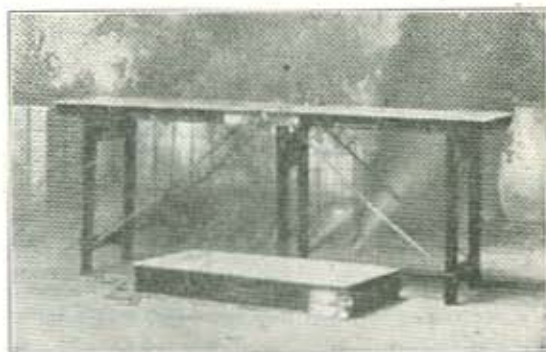
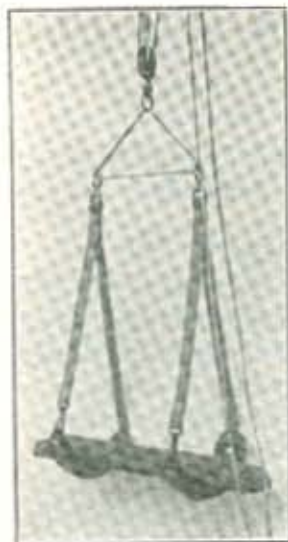
Immediately wanted a lady osteopath to take my practice in a Missouri town, for several months. A good proposition. Address "ad," care of the Bulletin. * * *

LOCATIONS AND REMOVALS.

In this column we print the locations and removals of all those whose names we can secure. Each month we look over all the periodicals of the profession to which we have access, and note all the changes mentioned there. So, if we do not notice your change of address in an other periodical, or we are not notified by the Postoffice department—who often assist us by notices giving place moved to,—or directly notified by you, we cannot be expected to keep up with you. WE URGE YOU TO SEND US NOTICE of your change immediately upon making any change in your address.

- Bolam, Julia S., '08, from Monett, Mo., to Box 282 Miles City, Mont.
 Carson, Harry, Jr., '09, 10 S. Arlington Ave., East Orange, N. J.
 Fleming, F. B., '09, has located at Montrose, Colo., Box 383.
 Frazier, Hugh M., '06, from Oakland to Key Stone Bldg., Mill Valley, Calif.
 Kenaga, Minerva, '04, Miners Bank Bldg., Rooms 206-7, Joplin, Mo.
 Loufbourrow, Ward, '07, from Columbus, Ohio, to 1314 N. Hudson St., Oklahoma City, Okla.
 Lyeon, Jessie V., '07, from Colby, Kans., to Longmont, Colo.
 Lyman, Elva, '09, from Iowa Falls, Ia., to Rooms 2 and 3 Marston Bldg., Madison, Wis.
 Maltby, H. W., '08-P. G., from 613 Congress St., to 673 W. Madison St., Chicago, Ill.
 Wells, Inez, '06, from Greenville, Tex., to Van Alstine, Texas.
 Sanborn, Genoa A., '08, 12 Madison Ave., Showhegan, Maine.
 Sheldon, T. W., '99, 1844 Sutter St., to Elkon Gaust Bldg., S. W. Corner Union Sq., San Francisco, Calif.
 Shipman, Kirk Wade, '08, from Wecneh, Wis., to 302 Wells Bldg., Milwaukee, Wis.
 Stafford, Florence, '00, from 625 Clyde St., Pittsburg, to 329 Bank St., Sewickley, Pa.
 Ure, W. R. and Sarah H., '06, from 403 Capitol St., to 814 Quarrier St., Charleston, W. Va.
 Vanderburgh, W. W. and Rose Bolam, '05, removed to the Elkon Gunst Bldg., Geary and Powell, San Francisco, Calif.
 Wickoff, L. E., '99, from Alton, Ill., to Booth, Tex.

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I think it a work which should prove of great value to teachers of osteopathic technique and to students. GILAS. HAZZARD, D. O.

It can hamper only an incompetent. MASON W. PHENLEY, A. B., D. O.

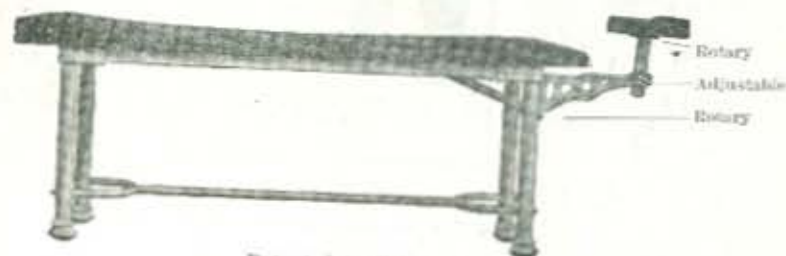
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