

# **The Journal of Osteopathy**

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# THE JOURNAL OF OSTEOPATHY

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## HEALING WITHOUT MEDICINE.

"God cures and the physician takes the fee," wrote Benjamin Franklin. "The science of medicine is founded on conjecture and improved by murder," said Sir Astley Cooper.

These opinions were expressed many generations ago, but until within recent years physicians continued to pour poison down the invalid's throat—many do yet. When thirty years ago Dr. A. T. Still, now at the head of the American School of Osteopathy, Kirksville, Mo., declared that a disturbed artery marked the time to an hour and minute when the disease began to sow its seed of destruction in the human body, he was ridiculed by old school physicians. But he knew he was right and he had the courage of his convictions, and in a Missouri town applied his principles, effecting a number of apparently miraculous cures. The more intelligent people doubted his success and the ignorant ascribed to him supernatural powers, and a local preacher made haste to inform the Lord that Dr. Still was possessed of a devil and advised God to kill him and save the lambs, lest he should exert his healing power upon them. But in spite of all opposition he continued his work and osteopathy is now recognized by many State Legislatures.

Dr. Still was a practicing physician of the old school prior to his discovery and development of this science. His father, three uncles and three of his own brothers were regular physicians. But the death from cerebro-spinal meningitis of three of his children, whom he and his brother physicians had been powerless to save, awakened in him a desire to know more of the real cause of disease, for he knew that in order to cure, the cause must be found and removed, as drugs were futile in healing physical ailments. By experimenting with living and dead subjects he discovered that this wonderful piece of mechanism called the human body could be manipulated at will by a skillful operator, and that the organs could be regulated much better by manipulation than by drugs. He found that a dislocated rib might produce heart disease; a dislocation in the shoulder rheumatism in the hand or wrist; a depressed condition of the spinal cord nervous debility. All these and many other true causes of disease were discovered, the results of which proved con-

clusively that there is an unerring law of nature, the law of cause and effect. The conclusion logically followed that better results could be obtained in combating disease without drugs than with them; that many of the diseases of the human family are directly traceable to the use of drugs; that the use of the knife and the practice of carving a human being to find out what is the matter with him could be avoided, and that many diseases heretofore pronounced incurable were susceptible to treatment by this science.

There is no similarity between osteopathy and massage, mental healing, faith cure, etc. It is an absolute science, capable of demonstration. Its key note is, remove the cause and the disease will disappear. Opie Read's definition of osteopathy "the champagne of nature," while not explicit, is certainly very expressive. Only a few years back this science was ridiculed by those who knew nothing of its merits. Since then people of the highest as well as lowest walks of life have investigated it, tested it, and warmly commend it.

"Osteopathy is beneficial," says New York's senior Senator, T. C. Platt. "I have been taking this treatment for some time past and am firmly convinced that it is beneficial. H. H. Rogers, of the Standard Oil Co., was the first to interest me; then, too, such men as Mark Twain, Senator Foraker, of Ohio, and others told me of the treatment, discoursing at some length on its merits. I can truthfully say in a general way, I have found it a most efficacious remedy for nervousness. It has strengthened my legs and arms, and been a benefit to me in many ways."

It is a notable fact that a large majority of the patients who seek osteopathic treatment have exhausted all the resources of materia medica and surgery in vain; yet the records show that many are either cured outright or are greatly relieved after other methods have failed to do either.

Osteopathy, by sheer merit, has forced itself into public recognition. In the words of the Chicago Times-Herald, "It is thoroughly scientific, rational and national. It is backed by philosophy, logic and a constructive basis that challenges investigation."

While hundreds of prominent people in the East have availed themselves of the advantages offered by osteopathy, there are yet thousands whose conception of this science is vague and altogether wrong; in the West it is different, for it was here that the science was discovered and results are known; but it is only a question of a short time until the whole world will know and avail themselves of the greatest therapeutic agent ever discovered.—The Mercantile and Financial Times of New York.

### ENLARGEMENT OF THE PROSTATE GLAND.

Dr. Carl P. McConnell, Chicago.

SIMPLE enlargement of the prostate gland is one of the most common and troublesome affections of men past middle age. Indeed, some writers have said it is almost the exception to find a man fifty-five or there-

abouts who is not having or has not had more or less disturbance arising from a congestion or hypertrophy of this gland. This, however, is not literally true, although a large percentage, about twenty per cent, suffer from prostatic enlargement. Neither is it necessarily confined to the old man, for cases are occasionally found in both the middle aged and young man. It is such a common affection and osteopathy offers so much in not only relieving the many symptoms but actually curing that it is surprising that our osteopathic literature does not contain more about prostatic diseases.

The prostate gland is located as many people well know from about an inch and a half to two inches above the rectal sphincter, anterior to the rectum where it can readily be felt through the thin rectal walls. It is about as large, normally, as a horse-chestnut, but is capable of being hypertrophied to several times the size of this. Directly below the gland toward the anal opening the membranous part of the vertebra, a portion of the bladder outlet, can really be felt. Immediately above the gland is located what are termed the vesiculæ seminales, or semen reservoirs. But the most essential and practical features of the anatomy are; first, the gland actually surrounds the urethra at the neck of the bladder, and, second, the gland is both muscular and glandular in structure, in other words, a musculo-glandular organ.

Thus the important relation of the prostate gland to the urinary bladder and the sexual organs is at once apparent. Any congestion or enlargement of the gland will encroach upon the outlet of the bladder as well as probably irritate or obstruct sexual nerve influences. The most common symptoms and the ones that concern us particularly in this brief article are the bladder symptoms—difficulty in urinating freely and irritation of the bladder.

The function of the prostate gland is concerned almost entirely with the health and vigor of the sexual organs. Here, however, we are considering its relations to the bladder when pathologically disturbed—a disturbance that follows mechanical enlargement and primarily produces mechanical and pressure symptoms, although secondarily many and severe other symptoms may arise.

Among the causes of congestion and hypertrophy of the gland are; first, man's upright position, and, second, weakened and disturbed innervation.

Owing to the frequency of prostatic enlargement some physicians have stated that it is a physiological process, in other words a normal condition accompanying old age. This, undoubtedly, is untrue. It is a pathological or diseased condition, for turgescence followed by hypertrophy in this part of the body is not an act of compensation but a primary weakness pure and simple. One of the reasons for this turgescence or congestion, as has been hinted, is probably man's upright position thus allowing and favoring a prolapsus of the abdominal organs and causing an interference to the pelvic drainage, and the upright position also favoring a constant gravitation of the blood to this part of the body. Then sedentary habits, as well as gout and rheumatism, favor a stasis of blood, so that the wonder is that the lower rectum and contiguous tissues are not more often inflamed than they are. It is astonishing how much

abuse our poor bodies will stand. If most of us would stop and think for a moment how really negligent and outlandishly abusive we are of all our organs we would shudder at the thought of it. They are our best friends but still the most abused.

Constipation, liver congestion, heart affections have a direct influence in causing prostatic congestion. The blood of this area is drained back through the bowels, the liver and into the heart. Thus any stoppage to the stream will be felt toward its source. Hæmorrhoids and other rectal diseases due to congestion of its blood-vessels, as well as bladder troubles favor prostatic congestion. There is an intimate association of the rectal, prostatic and bladder blood supply, and congestion or stoppage of the blood in one of these organs likewise affects the others. Also, there is a close sympathetic connection in their nerve supply, and injury to the nerves in one section of this part of the body will have an immediate effect on contiguous organs and structures.

Weakened innervation of the prostate gland from its spinal cord supply is an important consideration. In the lower part of the back certain nerves pass out through the bony spinal column framework that influence the health of the gland. Consequently any damage, as a strain or sprain to the ligaments of the spinal column may readily disturb the integrity of the nerves passing out and supplying the various and many organs. This is a common cause of weakened nerve supply and is peculiarly osteopathic.

Hence, to briefly sum up the situation we first have an organ made up of muscular and glandular tissues that is so located that it completely surrounds the neck of the bladder; and, second, an organ so situated that general weakness of the body will readily affect it, as it is in a dependent part of the body at a great distance from the heart, so that the common ailments as constipation, liver congestion, and piles readily congest the organ; and, third, any enlargement of the organ at once affects the urinary outlet, and thus causes retention of the urine and irritation of the bladder and sexual organs.

The treatment of prostatic congestion and hypertrophy has for years been one of the bugbears of the physician and surgeon. Many treatments have been devised, principally surgical; and, until of late most of the surgical interference was highly dangerous and unsuccessful. Even now surgery should not be resorted to unless the case particularly demands it, for in nearly every case it is a serious operation.

I am fully convinced from several years' experience that the osteopath can do a great deal for many of these cases. The osteopathic treatment, however, must be given with great care and caution for harm might result if the physician is not experienced with the anatomical features of both the healthy and diseased gland, from the standpoint of sight and touch.

The educated finger can detect a great deal, and the local treatment in these cases is indispensable. Yet if the physician does not reach the gland and tissues about it properly, and which in many cases is hard to do, irritation instead of palliation will result.

Relative to local prostatic treatment it is pleasing to note that the specialists on these diseases are gradually beginning to recognize the work of the osteopath, although, of course, not giving us any credit. Our local prostatic work is somewhat of the character of massage and surgeons are now practicing it, but they are still blind to our primary features of prostate treatment, viz., readjustment of the tissues, especially the spinal column. Dr. Cydston, one of the best known specialists on genito-urinary diseases, states in volume twenty-one of *The Twentieth Century Practice of Medicine* which appeared last November, that massage of the prostate, properly performed, is one of the most valuable advances in genito-urinary therapeutics that has been developed in years. Verily osteopathic therapeutics in its many phases is gradually being recognized for its sound and rational views.

The local treatment to the gland tends to immediately relieve engorgement of the blood-vessels and to remove exudates. The effect upon the nerves is to quiet them and thus at once lessen bladder irritability, a symptom that is extremely annoying. Treatments once a week or ten days, or possibly twice as often, accomplish the best results. Great care must be taken that the gland itself is reached and thoroughly treated.

Then it should not be forgotten that the spinal treatment with attention to the bowels, the hæmorrhoids if they exist, the diet, etc., is really the primary treatment, even if the local work is so absolutely necessary and essential.

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### SPEECH DELIVERED BY HON. JOHN A. ROGERS IN THE SENATE OF ALABAMA WHEN THE OSTEOPATHIC BILL WAS PENDING, SEPT. 19, 1903.

OSTEOPATHS should be examined in the things they profess and practice. We ask for this law in Alabama because the existing law does not in any way test the qualifications of the osteopath from the standpoint of their therapeutics or treatment. The object or purpose of all examinations is supposed to be and should be to test the qualification of the one examined to do the thing he claims to be able to do. We assert the existing law does nothing of the kind; we do not object to taking the present examination. We wish to add to it, not to take from it, but we do assert that the qualifications of the examined should be tested by those who are familiar with and have full knowledge of the subject upon which they propose to examine. In Missouri, the home state of osteopathy, where the practice is best known of any state in the union, the osteopaths have a State Board of Examiners composed entirely of osteopaths, consisting of five members. This is the second law in that state and was passed last winter by almost a unanimous vote, even the medical doctors on the floor of the House voting for the bill, and the State Board of Medical Examiners advised that the osteopaths should have this kind of a law. Osteopathy is now recognized in twenty-four states of the union, eight of which have independent boards of osteopathic examiners. Its practitioners

are at work in every state of the union, being nowhere molested or hindered so far as I have been able to learn except in the state of Alabama. The subject is of such a vast importance to the health of the nation and it has taken such a hold upon the mind of the people, it has grown to such importance that the World's Fair Management in recognition of its services to mankind have set aside July seventh, 1904, to be known as "America's Osteopathic Association Day." Dr. Still's book has been criticised and ridiculed. It is sufficient in answer to this charge to call your attention to the fact that most of the great inventors and discoverers have been eccentric and therefore have always incurred the ridicule of the generation in which they lived. No one in reading Hahnemann's book "The Organum" explaining homeopathy could form an opinion based upon good judgment as regards the virtues of homeopathy. So medical men having read from a book written by a great, but eccentric character, a pioneer in this new science, have not understood it, and frequently call it "massage," when as a matter of fact nothing is further from the truth, and to quote the definition explaining the difference between massage and osteopathic treatment of the great evangelist, Sam Jones, there is just as much difference between the two and requires just as much difference in the skill of any two persons as does currying a horse differ from the playing of a piano. At present the law in the state of Alabama affords no protection against fake or quack osteopaths, nor indeed against any kind of quackery. To take up the first of these propositions I desire to say that I have now in my possession a copy of a contract made between an osteopath and a medical licensed doctor of this city in which for a certain moneyed consideration the M. D. guarantees to the osteopath immunity from the operation of the law forbidding the practice of osteopathy in the state of Alabama. This is no reflection upon the great body of the medical doctors in this state who in my opinion from long, close and intimate association are as reputable, as honest, and as fairminded a set of men as you would find in any of the walks of life, but it is a clear demonstration not only of the injustice but of the folly and uselessness of the law as it now stands upon the statutes to protect the people from quack and fakir. Nor is it a reflection upon the osteopath who has this contract, but being sure of his position and feeling that he has a right to do good and to cure the ills of mankind as he is now doing he was justified in making this contract from the good that would come from it. Walking the streets of Montgomery today are scores of citizens who gladly, cheerfully and enthusiastically proclaim the benefits which they have received from this treatment. After all, this is but the fight that always grows out of and attempts to assert the rights of the community as against the benefits possessed by a favored few. It is an effort to assure to every citizen when stretched helpless and hopeless upon a bed of sickness to call to his bedside an apostle of the new yet efficient science of healing known as osteopathy. We as advocates of the osteopath disclaim any intention or any desire to have them given special, or peculiar recognition in the laws of the state of Alabama.

We merely ask that if they are to practice here they should be examined thoroughly upon the subjects they profess to know, and which are not taught in any of the old line schools of medicine. And just as in the examination of a student who applies to be admitted to any seat of learning is examined upon the different subjects by the different heads of the departments which he proposes to enter, being examined in English by a professor of English, in Latin by the teacher of that language, and in chemistry by a chemist, so we claim that a person desiring to practice osteopathy in the state of Alabama should be examined in all the great basic books as taught by all the colleges of the older school and in addition thereto upon the subjects of osteopathic practice, principles and diagnosis, as are now recognized in the established schools of osteopathy in America. We have been ridiculed and made a jest of for consuming so much of the valuable time of the legislature in urging the passage of this measure. The reply to that is this, what better work could we engage in that the attempt to give relief to suffering humanity and while osteopathy will not interfere with the recognized schools of medicines, nor displace them, yet we know not only from its past history, but also from the testimony of those who have received the benefits of its treatment that it will add to and greatly strengthen the healing art as now practiced to relieve the world from the ills of the flesh to which man is heir. For these reasons, Mr. President, we urge the passage of the bill, and appeal to senators to rise superior to all considerations of a selfish nature and appeals of a personal nature and to vote for this bill, it is to give relief to the sick, helpless and suffering in the state of Alabama. They are not and cannot be here in person to lobby for their cause, but from the bedsides in thousands of homes in this country today prayers are going up to give their advocates courage, and to strengthen their arms in battling for this just and righteous cause.

## TUBERCULOSIS.

FIRST PAPER.

Homer Woodruff, B. Lit., D. O., El Paso, Texas.

IN writing this article it is not our purpose to use scientific and high sounding terms, but state plain facts that should be of interest to every man, woman and child. The disease that we shall write about has carried off more people and left more suffering and sorrow in its wake than all the armies of the world. None but well trained physicians know much about it, and I am indeed sorry that there are so many physicians who have given this subject but little thought, and therefore are in a poor position to advise.

The United States alone offers up in round numbers over one hundred thousand lives to this disease in every three hundred and sixty-five days, and there are over one million two hundred and fifty thousand people in this country constantly suffering from it. New York City digs over eight thousand graves a year for tubercular patients and every seventh person in the

world dies of it, and the dissecting rooms show that almost 50 per cent of mankind have been attacked at some time, but the majority of whom have been able, either by proper care, or good constitutions, to have thrown off the disease.

It seems that such facts would cause people to inquire more closely into a disease that attacks so many and learn how to avoid it, and if afflicted, how to protect themselves as well as others.

In the first place there are so many people who deny that consumption is contagious and will take no precaution against it, when in truth and in fact it is a contagious and infectious disease of the very worst kind. The fact that it is an infectious disease should make it preventable; this is the one thing that every man, woman and child should learn. And further it is a curable disease if one knows how to care for himself and the kind of treatment to pursue.

We may have tuberculosis of any part of the body, but the lungs are most often attacked. We will note how infection may take place. In order to take the disease one must be in a receptive condition, his power of resistance and vitality must be lowered, and germs (tubercle bacillus) in sufficient numbers must enter the air passages in order to grow and multiply. The range of temperature must be from ninety to one hundred and five degrees Fahrenheit, there must be moisture and light must be excluded; dryness and sunlight are death to these germs. The lungs exclude the light and the range of temperature is favorable, and when the lungs are attacked, the germs grow and multiply in great numbers, and without proper treatment and good care the chance to arrest the disease is very unfavorable, but if taken in time and the patient is told how to care for himself, and instructed how to take care of his sputum and is given the proper treatment, his chances for recovery are good.

It has been estimated that one ill of tuberculosis will cast off as many as seven million bacilli a day, and if he is careless in expectorating he not only endangers himself but all those with whom he may come in contact.

Every person ill of tuberculosis should be provided with a proper receptacle, and his sputum should be treated with a powerful germicide, or be destroyed by burning.

The breath of a tubercular patient is not dangerous, but his sputum is, and therein lies the danger. Cornet, who has made an exhaustive study of this subject says, "A consumptive in himself is almost harmless and only becomes harmful through bad habits". One ill of tuberculosis should never kiss another in the mouth, many cases of this disease are traceable directly to kissing. A tubercular mother should never under any circumstances nurse her babe, if she does, the child is almost sure to take the disease.

Drinking utensils are often the source of infection, as well as clothes, carpets, lounges, beds and living rooms. These are plain facts, heed them.

Let us draw aside the curtain and point to a scene that is too often repeated. We take the following from an address delivered by Dr. Pottenger: "In 1890 a farmer of good family history was seized with la grippe who, owing

to a relapse was very slow in making a recovery. He spent much of his time during convalescence with a friend who was ill of tuberculosis, he himself became tubercular and finally died of the disease. His son, a strong healthy fellow, who waited upon him when he became too weak to care for himself, became tubercular and died four years later. A second son bought the carpet that had been in his father's room and put it in his own room. In about one year he began to decline, his trouble was also shown to be tubercular, he made a struggle for seven years and finally arrested the disease. Another son bought the couch upon which his father had slept, and used it to sleep on, he soon showed signs of decline and examination proved him to be tubercular. After five years he succeeded in arresting his disease and is still living. A fourth son and three daughters who were away from home attending college remained well. A young farmer rented the place and moved into the house; within two years his wife died of tuberculosis, and two children of marasmus, which means, most probably, tuberculosis of the bowels. Another young man with a healthy family moved into the house, and lost three children within eighteen months of an obscure bowel trouble, which was undoubtedly tubercular, and the father died a few years later of "bronchitis," which was most likely tuberculosis. It was now suspected that the house might have something to do with it, so a thorough cleaning was ordered.

"The paper was torn from the walls, the latter with the woodwork, floors and ceilings was washed down with an antiseptic solution, and the house was thoroughly disinfected. Thanks to this thorough disinfection, not one case of tuberculosis has developed in that house since."

The foregoing illustrates how the disease may be communicated from one to another, and how careful we should be. We could multiply illustrative cases of this order almost indefinitely. It is our duty as physicians to instruct, not only our patients, and our friends, but we should teach every one that tuberculosis is an infectious disease, and therefore, may be avoided. Do not treat a consumptive as an outcast. If taught the simple rules of hygiene, he is not dangerous. Give him a helping hand. Teach him how to live. A room that has been occupied by a tubercular patient should be well fumigated, the carpets and cloth furnishings should be given a good treatment of sunshine. Tubercular germs exposed to the direct rays of the sun cannot live over thirty minutes to three hours. Sunlight is death to them. The woodwork and furniture should be gone over with an antiseptic solution like formalin, three drams to one quart of water.

This article will be followed by another next month on the treatment of tuberculosis.

### \*PELVIC DISEASES.

Dr. Emilie L. Greene, Detroit, Michigan.

I feel somewhat unprepared to discuss this subject and find it quite difficult to say anything that will be of much interest to this large body of learned physicians.

As a writer I am not a success, but I may say that I have made a success of this particular branch of our practice, the treating of diseases peculiar to women, most of which arise from disorders of the lower vertebrae, hips and innominates; not dislocations but sublaxations.

Of course we all know of the curve we often find in these cases in the lumbar region, usually posterior, causing dysmenorrhea or amenorrhea.

I use no instruments (although I have them) and find that my two good osteopathic hands are the best friends I have. I occasionally use a speculum and examining electric lights, but prefer the sense of touch to that of sight. I rarely give local treatment oftener than once a week, but am guided by the case as seems best to me.

There are several classes of female troubles; one is a passive, extremely relaxed condition of the pelvic contents with excessive discharges, and prolapsus of uterus or ovaries, or both. "The blood to be pure must circulate freely, when it is sluggish the vitality is lowered, but when it stops we have fermentation and putrefaction taking place."

A second condition is an active congestion with inflammation.

A third condition is found in young women, who have never properly menstruated, and often the organs are only partially developed, and are drawn to one side, the spine is badly curved, and the innominates are slipped.

I have had a large number of cases of sterility which I have cured, the patients becoming pregnant within the year, who have never been in that condition before after many years of married life.

Simply putting things in proper condition and position, strengthening ligaments and toning up the system, were the means used, and how proud I am of building up, instead of tearing down, or cutting and depriving woman of the organs God gave to her.

I find that a loaded colon, as in extreme constipation is present in many gynecological cases, and makes much trouble. This condition in connection with a retro-flexed or retroverted uterus makes a very distressing combination, and then with varicose veins or hemorrhoids becomes a serious condition, but one with which we deal successfully, if taken in time.

When we have anteflexion or version, we have irritation of the bladder of more or less severity.

I find that many cases of dysmenorrhea suffer worse each alternate month, as the ovaries act alternately, showing one ovary to be in healthier condition than the other. Some of the worst cases that have come to me are those

Paper read before the Michigan State Osteopathic Association.

who have used hot water to excess as a douche. It is wonderful to what extremes they will go as to quantity, frequency and heat in that regard, and often under the physician's orders. "If a little is good, more is better" is their motto.

I do not use tampons or pessaries in my work except in extreme cases. I have removed several tumors by freeing blood supply, lifting and correcting anatomical lesions. I usually find one side of the whole body more rigid and contracted than the other. I often find in connection with this, headaches, gastric disorders, cardiac disturbances and intestinal indigestion, to say nothing of eye troubles, dizziness and even melancholia. This sympathetic system of ours is a wonderful system. How often these poor sufferers come to us and are saved from operations, the fad of the hour.

Then, again, many a so called tumor may not be a genuine tumor at all, but it may be an impacted and prolapsed bowel, an enlarged uterus from delayed menstruation, enlarged lymphatics, etc. A prolapsus of the intestines will cause inflammation of the ovaries by pressure on the ovarian veins, causing venous stagnation.

All this must be extremely uninteresting to you, who are in the work continually, and is very simple, but I leave all medical and technical terms to those of my brothers and sisters who follow. I studied them and remember most of them, but have accustomed myself to using simple language to my patients, so am out of the habit.

To sum it all up, the lesions I find may be any of the following: slipped innominates, lateral or posterior curve of the spine, tightening of lower dorsal and lumbar vertebrae, twisted pelvis, lesion between sacrum and fifth lumbar, and dropped or twisted eleventh and twelfth ribs. My work is toward rectifying these lesions, (for I am a lesion osteopath) treating over the sacrum for sacral nerves, treating pudic nerves, replacing the uterus, lifting the pelvic contents and freeing the circulation to ovaries and all surrounding tissues.

I use no "adjuncts." I advise fresh air, exercise, proper diet, and baths, in fact every thing that common sense dictates in the way of hygienic surroundings, but I do not administer those baths, rubs, etc.

Why are women, who should be strong and healthy troubled with ill health and diseases of the pelvic organs? The cause of most of these troubles is found in tight, straight front corsets, heavy skirts, improper diet, late hours, bad air, worry and nervous strain, which depletes the blood and weakens the system, thus predisposing to troubles of this kind. Then when we get the history of a fall, a runaway accident or possibly a two or three hours ride on suburban cars standing in the aisle, followed by sudden chilling, the picture is complete. They are not strong enough to overcome it. Then after taking one kind of pill for stomach, a tablet for digestion, another for liver, 20 drops of something for nervousness, a sedative for insomnia, etc., etc., they come to an osteopath, expecting relief at once, and are not disappointed.

If I had never treated any other class of diseases except those belonging to my own sex, I should still be proud and happy to think that I found my way to the American School of Osteopathy, and our dear Dr. A. T. Still, its founder and the friend and father to all his children. This is only one woman's experience in one branch of our profession, and is probably the experience of each and every one here.

"There is nothing new under the sun," but never make the mistake of thinking that a patient has the "hypo" and that nothing ails her, till you are sure. For even if she has the "hypo" there is a cause for it. Our work is to find that cause and remove it.

### OSTEOPATHY TO AN OUTSIDER.

Geo. R. Baker of the St. Louis Star.

To the average newspaper man, be he in the editorial or business end of the profession, there is given an unusual amount of skepticism. Teeming, as the columns of every paper are, with sensational stories, which in many cases never happened, side by side with advertisements of marvelous remedies for every ill to which man is heir, the ordinary newspaper gradually gives rise in him to the belief that every new thing is a "fake." Naturally he goes on his way with cynicism and disbelief written large on his face, until he runs up against some stubborn thing which refuses to vanish before his ridicule. Or else he ignores everything which is contrary to established notions and allows his mind to fall into the narrow rut of long-established habit.

I was in this frame of mind, when the train disappeared around the curve in the distance, leaving me on the depot platform at Kirksville. A business trip to the different colleges of Missouri and Kansas had brought me to Kirksville and as I looked upon the same kind of a depot, the same kind of a country town, clustered around a little square, I had no thought but that the American School of Osteopathy would prove the same kind of a school as the others I had visited; a gloomy building with dark deserted halls, peopled only by janitors and watchmen. The word "osteopathy" conveyed no intelligence to my mind beyond the remembrance of a certain osteopathic office which for beauty in furnishings had aroused the belief that there must be a few who pinned their faith to osteopathy.

The few times I had heard it discussed had resulted in nothing more than my classing it with Christian Science, Dowieism, Kneipp Cure and other so-called healing arts which have sprung up from time to time.

But my interest thus far dormant was quickly aroused by my first sight of the building which houses the students. This interest was still more intensified when on entering the hall, I was astonished to find them thronged with students. I asked some questions, aroused by my curiosity: How many stud-

ents? 700. How many graduates? 2000. Truly, here was something more than a fad, for no fad could live so long nor attract so many students as had osteopathy. A few more inquiries and I was in possession of the salient features which go to make up osteopathy. I smiled as I thought of the many physicians among my relatives as I realized that here was a new force for them to reckon with.

By this time my cynicism and skepticism had been sadly shaken and what little remained was soon swept away at the sight of the many who daily come for treatment. The confidence which pervaded them all, whether newcomers, those on the road to recovery, or those already cured added to what I had already seen and heard, swept away the remnants of my disbelief and I realized that osteopathy holds out not only a rational theory but is able to back up this theory by actual performances.

If I needed more evidence, a talk with some of the students soon furnished it. To the question, "What led you to believe in osteopathy?" I met with the almost invariable answers, "Personal experiences," or "Experiences of my friends." And when I looked over the roster of students and graduates and saw every state represented by one or the other, if not by both, I realized that osteopathy is not only worthy of consideration by all, but that it is receiving that consideration in every part of our country.

### HEADACHE POWDERS.

A CORRESPONDENT sends us a printed copy of an address recently delivered before the Pennsylvania Pharmaceutical association by Richard V. Mattison, Ph. G., M. D., in which is discussed the dangers from the use of the various headache powders prepared from coal tar derivatives. The address is so pregnant with thought and so clearly and forcibly put that we take the liberty of presenting a few of the more striking paragraphs, believing that the wider dissemination of such expressions from recognized source of authority cannot but assist in checking a practice which has within the past few years undoubtedly been responsible for much evil.

One most important fact to which the address calls attention is that headache is but a symptom in most cases and may depend upon one or more of a large number of widely different disorders. From the osteopathic concept headache as a symptom is not to be treated—treatment under such a condition being as unsuccessful as it is illogical. As a warning symptom it is to be used, not gotten rid of. Pain of any kind is physiological and in many conditions and in numerous relations it is beneficial. Hence the removal by whatever means of a pain which is necessary for determining causes is little less than criminal. When there is added to this fact the further one that the use of the headache powder is positively disastrous in its effect upon other organs and functions not primarily involved the argument against the use of the



powder is decisive. In this connection we quote rather fully: "The results of a dangerous nature that come to the individual from the promiscuous use of the coal-tar derivatives are such as show profound impairment of the circulation from enfeebled heart action. In other words the action of these remedies is to cripple the *vis a tergo* that propels that life-giving fluid whose contact bathes every tissue into rejuvenated life and without which there is no longer functional activity or structural integrity.

"A study of the physiological action of the coal-tar derivatives shows them as a class to be possessed of similarity of action with slight difference in degree, as might be expected, but capable to a greater or less extent of inducing such systemic effects as dizziness with confusion of ideas, cyanosis, a pale leaden appearance of the skin which is bathed in a cold, clammy perspiration, a small thready pulse that is slow and feeble, sighing respiration, dilated pupils, vomiting, incoherent speech, and an expression of collapse and impending dissolution, muttering delirium, coma, arrested heart action, and death.

"An effect of the coal tar remedies being as we have seen from their physiological action to depress the action of the heart, it becomes patent at once that the public in using the headache powders made from them, is trifling with a remedy *as potent for harm as for good*, while the latter effect only seems to be recognized.

"As was stated in the beginning of this paper, it is not the deaths alone that measure the danger in using coal-tar remedies. Those whose position and experience have placed them in possession of facts which entitle them to speak with authority, tell us in no uncertain language that the widespread use of the coal-tar remedies and their compounds is rapidly and unquestionably telling upon the human heart, and is a factor not to be ignored or lightly considered in concluding the causes of the marked increase of heart lesions over those of a quarter of a century ago.

"My interest in the crusade against the coal-tar remedies has been firmly enlisted in consequence of the sudden death of an intimate and life-long friend who was addicted to the frequent use of anti-kamnia. I cannot help but feel that if he had not taken this headache remedy so commonly he might have been with us today. Another case coming under my own observation was that of a nurse in my employ who barely escaped death from the use of anti-kamnia in  $2\frac{1}{2}$  gr. doses which had been prescribed by her attending physician. Upon arriving home by accident I found her in a state of collapse and only the most heroic treatment saved her life which would have been offered up a sacrifice to the use of anti-kamnia had the necessary aid not been given at the opportune moment.

"Are headache powders or tablets made from the coal-tar derivatives dangerous? *Does this question admit of any argument, gentlemen?* \* \* \* \* \*  
If poisonous and almost fatal results followed in one case may they not reasonably be looked for in other cases? And is it not true that they have occurred in many cases that have come to our own immediate knowledge to

say nothing of the thousands, probably tens of thousands and more, of cases of which we never hear."

Who is responsible for this undoubtedly widespread use of headache powders? The writer says on this point: "We fear in common with those members of the Aesculapian cult who believe an honest confession is good for the soul, that it may justly be charged to the medical profession, that their indifferent manner of looking upon headaches and the poor results that followed an attempt to cure them has almost made it necessary that the suffering public try some other promising measure of relief. The temporary relief that many times follows upon the use of some vaunted headache nostrum has not escaped the notice of a jealous profession, and not to be outdone, it has even become common for members of this learned body to order in their prescriptions some copyrighted 'anti' derivative of coal tar, which becomes at once an endorsement of the magical powers of the new remedy or compound." We believe there can be no evasion of their large responsibility by the members of the medical fraternity. It is unquestionably through them in the first place that the seeming value of the drug was discovered. The inevitable result followed. Men will sell every principle of honor for money. The manufacturer and the pharmacist will supply the goods, the laity will buy them, if pain be relieved by their use all this will happen, is happening, though the medical fraternity is awakening to the fact that the patient is much safer without the drug than with it. But their awakening is in large part ineffective. The harm has been done. The quenching of the insane desire for the pain killers so carelessly initiated by the physicians and fed by the manufacturer and the druggists can now only be accomplished by a long and laborious process of education. The writer of the article from which quotation has been made, himself a doctor of medicine, apparently refuses to shoulder the responsibility, however, and by inference justifies the use of the pain killing substances provided they be administered by skilled physicians. The responsibility for their prescription by the unqualified he would throw upon the manufacturer, and that many times abused individual is thus disposed of in the conclusion of the address: "Is he any better than the culprit who turns a switch to hide the red light of danger and wrecks a train that he and his gang may loot and plunder? Is not the manufacturer of headache powders from coal tar derivatives who holds out to the public the deceptive words 'Guaranteed Harmless,' about on a level with a nearby doctor who would remove the red light set at night as a warning of a dangerous obstruction or excavation in the street or across the walk thinking thereby that someone in the dark might be injured and he would get a job? A person who willfully exposes a child or non competent person to a contagious disease is punishable by a heavy fine or imprisonment in some of the states, as in Michigan for instance. What better is the headache powder manufacturer who willfully and continually exposed the public to the dangers of heart failure and death? But it is useless to make further comparisons. It is more light which the public needs, not more law."

But why limit these considerations to the headache powders? To the inquiring there will almost surely arise this question: if it is now determined that headache powders are powerful for harm why is it not likely that when all is known it will be found that *all* drug preparations are equally with the powders associated with certain danger? The query is legitimate. The answer is obvious. There can be no question that we must ultimately learn by sad experience if not by the dictates of reason that all drugs are alike to the organism, differing only in degree. They can modify function only by injuring tissue—just as the headache powder modifies the function of circulation by disturbing the tissue of the heart. If headache powders are doomed, in their fall they will of necessity carry with them in large part the whole pharmacopeia—and drugs will have been utterly dethroned. May the logic of events hasten the day.

### SIX MONTHS' PROGRESS AT THE ST. LOUIS SANITARIUM.

THE first day of November completes the first six months' work at the A. T. Still Sanitarium in St. Louis and it seems a good time to review the progress achieved thus far.

To say that the success so far attained has been as remarkable as it has been gratifying, is a poor appreciation of the work accomplished. Started as an experiment, with nothing assured save the good will of the profession, it was to be expected that the first few months would be satisfactory if each month showed a gradual increase in the number of patients. But the management have been most agreeably surprised by the rapidity of the sanitarium's growth. There has been no time since its opening when the patronage has been otherwise than satisfactory and during the greater part of the time, its capacity has been tested; added to this there has been a splendid office practice.

A mistaken idea has become current that school work has been conducted in connection with the sanitarium. The foundation for this belief probably lies in the inauguration of a post-graduate course of the A. S. O. in St. Louis during July and August of this year. The success met with by this experiment has been so gratifying that it has been decided to make it a permanent feature. But it should be firmly borne in mind that this course is as separate and distinct from the sanitarium work proper as day is from night. Each case at the sanitarium is under Dr. Hildreth's personal direction assisted by competent practitioners.

In looking for reasons for the sanitarium's success, there are three or four factors which are entitled to consideration. First of all, the support given by practicing osteopaths has been of inestimable value. Loyally have they assisted and it is but fair to state that without their efforts, the sanitarium would not now be on the high road to success. On the other hand, the sanitarium itself has been of equal value to the profession, enabling them to give their patients service heretofore impossible.

There is another point which might escape the notice of the casual seeker after reasons for the institution's success. This feature is the one which sets the sanitarium apart from the ordinary hospital. To the patient, who, racked with pain, approaches the average hospital with dread at its cheerlessness, entirely different conditions are presented at the A. T. Still Sanitarium. He sees a beautiful residence surrounded by a lawn of restful green, its very exterior proclaiming a home and not a hospital. Nor is this impression dispelled when he enters the hall. Instead of the traditional bare floors and whitewashed walls, his eyes are greeted by richly carpeted floors, walls hung with pictures and an atmosphere that breathes of homelike rest and quiet. These features pervade every nook and corner of the house. From the reception rooms which open off the hall to the topmost living room, there is no inharmonious note. On every hand, there is exhibited a skill in furnishing which cannot fail but excite admiration.

This article would fail to be complete in ascribing reasons for the sanitarium's success, did it omit reference to the work of Dr. A. G. Hildreth who has been in charge since its inception. To those, who have been in touch with the work, the value of his services is well known but to the outsider full appreciation of them can hardly be imagined.

Beyond the mere financial success of the sanitarium, gratifying as that has been, there has been achieved a still greater success. It has been amply demonstrated even in this short time, that such an institution fills a want long acknowledged by its founders. Ever since osteopaths have begun to scatter throughout the country, the need of some institution which should fill the same place in osteopathy which is occupied by the hospitals of the medical schools, has been felt. This want has been supplied by the establishment of this sanitarium but its benefits will be still more keenly felt by the outside osteopath when, attracted by the World's Fair, the thousands of osteopathic practitioners and patients reach St. Louis and find in the sanitarium accommodations and conveniences otherwise impossible.

### Osteopathy Day at the World's Fair.

If any proof were needed of the national recognition of osteopathy and the osteopathic profession it would be furnished in the designation of July 7th as Osteopathy Day at the World's Fair to be held in St. Louis in 1904.

Not alone is it a recognition of osteopathy but it also gives evidence of the remarkable growth of our profession. The last great international exposition was the Columbian Exposition at Chicago in 1893, just ten years ago. At that time, we venture to say that few of our readers had even heard of osteopathy, and if the profession as then consti-

tuted had had the courage to have asked for a special day, their request would have undoubtedly been refused, if not totally ignored.

Ten short years have indeed worked a wonderful change and it is a matter of congratulation that among the thousands of interests who sought recognition at the hands of the World's Fair officials, our profession should be one of the few honored.

The programme for the day has not yet been announced but the fact that it is in the hands of the executive committee of the A. O. A. is a guarantee that it will be worthy of the world's greatest exposition.

## A Feeble Exposition.

At one time physicians of the old school ignored the newly arisen system of "cure." Later ridicule was their weapon. At present the attempt is to show that osteopathy is not new and that the regular practitioners have throughout the centuries been aware of the good effects from manipulation but have been neglectful of the practice to the detriment of their own success and to the flourishing of the quack. In a recent issue of *American Medicine* Dr. Richard Cole Newton, M. D., attempts to answer the question "Is there any good in osteopathy?" The article which covers two pages of closely set type is remarkable mainly because of the evident prejudice, ignorance, and peculiar logic of the writer. There are a few points of interest which he touches upon that call for remarks. As introductory to the discussion the writer of the article insists that Dr. Still is an impostor; for in the early seventies there was an Italian peasant woman brought over to this country by General Stuart L. Woodford of Brooklyn, N. Y., who cured disease by setting bones—the correctness of this history being vouched for by "several reliable people." Further according to this writer it is very likely that both the peasant woman and Dr. Still acquired their knowledge of the method from some common source!

From this interesting bit of history the author takes up the question of the capacity of the school at Kirksville to teach the branches necessary for a medical education, basing his conclusions on the findings in the case of "Nelson versus the State Board of Health of Kentucky." Osteopaths are familiar with the gross misrepresentation of actual conditions made by this notorious board of health and hence they may view with greater charity and pity the conclusions at which Dr. Newton arrives. After having proved to his own satisfaction and by the evidence above referred to that the American School cannot teach the necessary branches he proceeds to puncture the osteopathic theory. He specifies several things that according to himself are especially important to the osteopath, among them a sense of touch sufficiently delicate as to detect a hair under twenty-one sheets of paper,

and the prime importance of the third cervical vertebra, presumably "from a superstitious veneration for the cabalistic value of the number three"!

Having thus broadly stated the fundamentals of the science, he says:

"It is idle to consume time arguing against such allegations. Anyone can convince himself by looking at a skeleton that it is impossible to move or rotate an individual vertebra so as to slip it into or out of place. And it is equally absurd to claim that any touch, no matter how delicate, could detect slight differences in the positions of the vertebrae. In short, both theoretically and practically, osteopathy is, as Dr. Bođine asserted in the case already quoted, the *ne plus ultra* of absurdity. As has been wittily said, one might as well expect to move a house by swinging the doors rhythmically as to cure an infectious disease by stretching the arms or legs of the patient."

But the doctor in spite of his lucid demonstration of the extreme absurdity of the system seems to be troubled at the undisputed fact that others fail to see the absurdity, and inquires as to the cause thereof:

"And yet it must be acknowledged that of all the modern irregular systems of practice, this one has probably achieved the largest measure of success. Perhaps there are more Eddyites in the eastern and middle states than believers in osteopathy, but taking the whole United States one would probably find more believers in osteopathy than Eddyites.

"Why is it that osteopaths have made such strides into popular favor when, as we have shown, their pretensions are so absurd and their education so inadequate? There may be several reasons for this. In the first place, probably every system of quackery has something of more or less value in its practical application; and osteopathy is apparently no exception to this rule. Second, sick people in general, and especially *les malades imaginaires*, care very little for the theoretic or historic aspects of regular medicine, its glorious past, or its brilliant future. They are looking for relief and will patronize the worst quack almost as quickly as the most reputable physician; especially if the quack gains their confidence by his

magnificent pretensions. Third, the so-called system is new and striking, and possesses all the charm of novelty. And fourth, it has been pushed with astonishing persistence and assurance, and as Pliny observed many years ago, 'Anyone with a sufficient stock of impudence, may reasonably well pass for a physician.'"

Disposing of this question in the above manner there seems yet to be a doubt in his mind as to the convincing nature of his argument and he decides that perhaps there is good in the practice—the osteopath doesn't explain it correctly:

"There seems, however, to be no question that these practitioners do by some means benefit a considerable proportion of those applying to them for relief. Leaving out of consideration the acute cases in which recovery would take place in any event, and the large percentage of patients who are benefited by mental suggestion, and to whom each new system of quackery as it comes along is a revelation and a source of delight, there are many more or less chronic and irresponsive cases, which are ameliorated at all events temporarily by the osteopathic practitioners. Right here it behooves the profession to look into the matter a little carefully. If these irregular practitioners can help any considerable number of patients by their peculiar treatment, it is not only to our interest, it is our duty to study their methods as thoroughly as possible in order to ascertain not what they claim to be able to do, but precisely what they can do, and whether they have facilities and powers for the treatment of disease and the relief of suffering which we do not possess."

After this final explanation the doctor seems to feel better and goes so far as to express the opinion that regular physicians may learn even of a quack—they must do so or the quack will get the business!

We are at a loss to know whether to consider the writer seriously or to believe him fond of irony when in discussing the possible harm from treatment he expresses his solicitude for the preservation of the good there is in osteopathy. If he is serious the osteopathic reader of the following will hardly restrain a smile:

"And there is danger that the public and the profession learning of these unfavorable results, may too sweepingly condemn this method of mechanical therapeutics and relegate the whole system with whatever good it may contain to oblivion."

The writer in closing his discussion decides that the best solution is that whereby a protectorate shall be exercised over the osteopath by his careful, intelligent, and discriminating guardian, the regular practitioner.

As a whole the article will appear more or less ridiculous to the osteopath and entirely unconvincing to the medical practitioner of average intelligence, and prejudice. *American Medicine* is certainly unfortunate in selecting as its reporter of systems of treatment a writer so illy prepared to present the subject from an impartial standpoint. We trust that magazine's usual high order of productions will be regained.

## Concerning Some Jollies That We Know: The Physician's Tact. By Dorothy Dix.

Among no other class of people has the jolly been brought to such a degree of artistic perfection as among physicians.

Indeed, it is the family doctor's ability to push the velvet that enables him to walk on velvet, for if it were not for the abnormal growth of vanity from which we all suffer there would not be enough diseases to go around and provide physicians with car fare, to say nothing of automobiles.

Ingrowing self esteem is, however, a universal complaint, and the audacity and courage with which doctors minister to it has gained some of the more successful among them the title of nerve specialists.

Inasmuch as before he is licensed to practice upon people, a physician is compelled to devote several years to the study of human weakness, it will be seen that he starts out with a scientific knowledge of how to work the jolly that no amateur possesses.

Unfortunately, though, man is prone to err, and occasionally the doctor makes mistakes.

He may apply his jolly too thick, or too thin, or even rub it on the wrong spot.

In such cases we simply change our physician and keep changing, until we find one

who knows just how to play upon our egotism. Then we say, "Thank goodness, we have found a doctor who understands our constitution at last."

A physician who has made a scientific study of the noble art of jollying begins by recognizing the fact that every man who is sick believes that he is dangerously and desperately ill, and that no human being ever endured such a pain in the head before and lived to tell the tale.

The doctor is perfectly aware of this peculiarity, and uses it to his own advantage.

He never diagnoses a pain in the head as sick headache. It is always incipient brain fever or cerebro-spinal meningitis, or something else with a blood-curdling name.

Every colic is a slight attack of appendicitis, and his patients never have a bad cold—they are always threatened with pneumonia.

And when he tells us how sick we have been and how he just pulled us back from the edge of the grave, we all believe him, for we know how we felt.

You needn't tell us that anybody could suffer that much pain and not be terribly ill, and if it hadn't been, as the doctor said, that we had so much vitality and such an enormous will power, there's no telling what would have happened.

Perhaps we have been eating and drinking too much and outraged nature is taking its revenge upon us, but the doctor is too clever and discreet to attribute our woes to our stomachs.

"H'm," he says, looking gravely at the ice cloths upon our brows, "h'm, too much brain work. I have been fearing it for you. Too much thought, too much brooding over your work.

"You are living entirely upon your nerves, and must come down to the earth and try to interest yourself in commonplace subjects.

"You must give your body, as well as your intellect, a chance," and as he goes off we murmur, "How true and how wise we were to send for a doctor who understands our symptoms at a glance!"

Of course, all of the jollier's pills are

sugar-coated, but he never tries to force one of them down a patient's throat unless he is sure it will be swallowed without a murmur.

If, for instance, a gouty old gentleman, who has been a high liver, comes to him, the jollier takes the case under consideration for a few days and then gives the sick man some sagacious advice.

"My dear sir," he says, "you have a very peculiar constitution, and you should be very careful how you live, especially about what you eat and drink.

"You should eat plenty of good, rich, food, like terrapin and lobster Newburg and nourishing things like that, but you must use every precaution to see that it is properly prepared."

And there's never a word to any of us about eating too much and working too little, or leaving off doing the things we want to do.

That is left to the poor doctor on the back street, who doesn't understand the ethics of the profession.—St. Louis Republic.

#### A Proposed History of Osteopathy.

[Copy of circular letter sent out by Dr. E. R. Booth.]

I have received many requests within the last six months to write a History of Osteopathy. It has been urged that such a book ought to be published during the life of those most familiar with the early history of our science—its origin, its battles for recognition, its triumphs. Osteopathy has passed through the experimental stage, and now is the time to make permanent record of its work during the first decade of its public existence.

To make such a history accurate and as complete as possible, the co-operation of those familiar with its growth to the present time is necessary. I already have a large amount of material available for this work, gleaned from many sources, much of it obtained during my recent tour of inspection of the osteopathic colleges. But I want everything that can be used to make the history such a record as will prove to be a source of information to the present generation, and a fund from

which the future historian can draw a portion of his supplies with absolute confidence.

I most respectfully solicit information, such as will stand scrutiny, from all into whose hands this circular may fall. Do not consider any facts you possess valueless. Every thing relating, in any way, to the history of osteopathy might be of inestimable value to those who will carry forward our work after we have ceased to labor. I would also like to have the name and post-office address of all persons who might be able to give facts, incidents, personal experience, or other interesting information relating to Dr. A. T. Still and the early history of osteopathy.

This history will be published in book form, with first-class typographical work, good paper and binding, and will be sold at a price that will place it within the reach of every osteopath, every friend of osteopathy, and every one desirous of knowing what modern science is doing towards revolutionizing the healing art. It will probably contain a chapter for each of the following subjects: Dr. Andrew Taylor Still. Development of Osteopathy. Osteopathic Schools. Osteopathic Legislation. Osteopathy and the Courts. Osteopathy and the People. Osteopathy and the Medical Profession. The American Osteopathic Association. State Osteopathic Societies and Local Organizations. Osteopathic Journals. Possibly a chapter for each of the following subjects may be inserted: Landmarks in the History of Medical Practice. Drugging in Medical Practice. Other Procedures than Drugging in Medical Practice. The Principles and Practice of Osteopathy.

With the aid of the competent assistance I will have in my office during the coming year, I expect to be able to publish this proposed History of Osteopathy before the meeting of the American Osteopathic Association in 1904. In order to do this, all information must be sent in promptly. Please let me hear from you at your earliest convenience.

E. R. BOOTH,

601-603 Traction Bldg., Cincinnati, O.

An Interesting Letter from Mrs. A. L. Conger.

EDITOR JOURNAL OF OSTEOPATHY,  
KIRKSVILLE, MO.

Dear Sir:

One of the most interesting cases I have had of late is that of a girl about six years old who had whooping-cough two years ago. Some time after her recovery she was brought to me for treatment. She was badly misshapen, the left scapula was about five inches from its normal position and the right one was greatly atrophied. From the first to the seventh dorsal vertebra there was a lateral curve to the left. The chest was compressed till the child could scarcely breathe. Dr. Ellen B. Ligon went with me about the third treatment and again about the eight and was greatly surprised at the results. The grandmother says it is "not so much a cure as a miracle." The child's health is now very good, she can run and play and the deformity is hardly noticeable. I am sure it is a good thing to write each other of results as all osteopaths have good results, more than enough to balance the failures.

I have been asked to send osteopaths to the Philippines and Australia, so you see the world is before us. We will "gird on our armor and be marching on" to sure victory. I am pleased that I was permitted to be the first osteopath on foreign soil, our new possessions, the Philippines.

I was amused to hear that an M. D. here said he wished Drs. Evans and Conger had all the cases of cerebrospinal meningitis, and hoped to see us in an epidemic to see what we would do then,

We have had some very interesting cases and will be glad to tell the JOURNAL of some of them from time to time—tumors removed, dislocations reduced, and "chronics" cured.

We are with you heart and hand to uphold, aid, and advance the science of osteopathy as taught and discovered by Dr. A. T. Still, in and out of season, through good and ill reports. I am now as I have always been since 1896, an advocate of the science and have no idea of retreating.

Success to you.

MRS. A. L. CONGER, D. O.  
Akron, Ohio, October 15, 1903.

**Progressive Practitioners.**

Dr. J. S. Baughman and wife, Dr. Nannie Ball Baughman, of Burlington, Ia., are among that number of progressive practitioners who believe in keeping abreast with the times in their profession. Although Dr. Baughman has practiced since his graduation with eminent success, and today stands high in the osteopathic ranks in his state, being president of the Iowa state association, yet, as he expressed it, he felt that a five months' post-graduate course at the A. S. O. would be of inestimable value to him as he was aware of the fact that the A. S. O. since the time of his graduation four years ago, had developed much that might be termed definite osteopathic knowledge. As a result, he and Mrs. Baughman are now taking the post-graduate course at the A. S. O. He said, "I think we all ought to come back occasionally and learn the new and unlearn some of the old. We need to brush up if we expect to keep up to the times and there is no better place to do it than right here at the A. S. O. where we get the kind of osteopathy we want, the kind that cures people. I believe all our practitioners after being in the field a few years ought to come back and take this course." Dr. Baughman is one of those who believe in high standards for our profession. In talking about the osteopathic outlook in general he said: "The time has passed when the doors of our colleges should be opened to any one presenting him, or herself to enter upon the study of osteopathy. Educational attainments, physical ability for hard study, and hard work in the field after having finished the course in our profession, with a force of purpose to dare and do, are some of the requirements essential in the makeup of one who wishes to make a success in our profession. True, with this we need those qualities which should characterize every physician, and which every lady or gentleman should wish to possess in order to make himself or herself felt *needed* in a good community.

"With this outlook before us, we can see why every individual would not be qualified to enter upon the practice of our profession, and if not able to do that, he or she should not be induced to take up the study of os-

teopathy. We congratulate the A. S. O. in her step forward in this matter.

"I am indeed sorry to see some of our graduate osteopaths taking up the study of medicine in medical schools. I am not sorry to know that they want to learn more for that is a worthy ambition, but I am sorry that they are going to medical schools to get that in which they feel they are lacking, when it can be had today much more, thoroughly and more to the point in our osteopathic colleges. These people instead, it seems to me, ought to go back to their osteopathic schools and take up post-graduate work and keep in touch with osteopathic progress."

**Dr. J. V. Howell Arrested.**

Dr. J. V. Howell, a practicing osteopath of Vineland, N. J., was arrested last May for practicing medicine (osteopathy) without a license. He was held to await the action of the grand jury and when the matter was brought before that body he was released. In a letter dated Oct. 18, to the JOURNAL OF OSTEOPATHY, Dr. Howell gives the following interesting account of his battle against ignorance, superstition, M. D.'s:

"Enclosed please find fifty cents for my subscription to the Journal this year.

Osteopathy is making great progress in New Jersey. Every legitimate D. O. in the state is a member of the state association and the national association, a distinction I believe no other state enjoys. I have had troubles of my own since locating here. Eight of the nine M. D.'s in town formed a union and had me arrested twice last May and put a notice in the local paper that I would be arrested every time I gave a treatment. The matter came before the grand jury last week and was thrown out. The M. D.'s are all in politics here and when the grand jury met it was found there was an M. D. for foreman. But the president of the Vineland National Bank whose wife and himself I had successfully treated, was on the grand jury, as was one or two others who were favorable to osteopathy. When the witnesses were called each one was asked if he or she had been treated by me, if they had been given any medicine or

prescription or if I had performed any surgical operations on them. They were then excused. The law was then brought in and read. It was found that it regulated medicine and surgery, that nothing was said about osteopathy although it prohibited the laying on of hands. It was then decided that as the witnesses were of the most prominent families in the county and that they had all been benefited, there was no reason that the county should go to the expense of prosecution. The M. D.'s had done their worst and failed and they were greatly chagrined. One of them said he would still fight the thing to the better end. "Whom the Gods would destroy they first make mad." The M. D.'s are mad but in the meantime their patients are coming to me for treatment."

**Vermont Osteopaths In Session.**

The fourth annual meeting of "The Vermont State Osteopathic Association" was held at the offices of Dr. H. H. McIntyre at Randolph, Oct. 7th and 8th.

The following osteopaths who have come into the state since the last meeting were elected members: Drs. Raymond P. Evans, Lewis D. Allen, Herman K. Sherburne, Mary B. Sherburne, Henry P. Whitcomb, Harry M. Loudon.

Our state association now has a membership of fifteen, twelve of whom were present.

President Dr. Guy E. Loudon gave an excellent address on Ethics. Every osteopath ought to read it.

Several subjects mentioned in this address afterward caused a lively discussion: viz., osteopaths giving drugs in extreme cases, rate cutting, and the "Consulting Osteopaths'" cards which several of the profession are getting out.

These subjects were thoroughly discussed and a good understanding and mutual agreement was the outcome.

The following officers were elected for the ensuing year:

President, Dr. Lewis D. Martin, Barre; vice-president, Dr. Chas. G. Wheeler, Brattleboro; secretary and treasurer, Dr. Mary B. Sherburne, Rutland. Executive Committee: Drs. Guy E. Loudon, H. K. Sherburne, L. W. Allen. Legislative Committee:

Drs. L. D. Martin, H. H. McIntyre, W. W. Brock, Guy E. Loudon.

Dr. Wm. W. Brock read a paper on "Where Is The Lesion In The Chronic Case?" The paper showed a good deal of thought and study, and his reasoning was deduced from results obtained in his practice.

Dr. Chas. G. Wheeler gave a very interesting talk on "Rotary Spinal Curvature." The doctor showed he knew the spinal column thoroughly.

The meeting was declared to be the best the association has ever had. It was voted to hold two meetings next year instead of one.

MRS. H. K. SHERBURNE, D. O.,  
Secretary.

**Kansas City D. O.'s Pass Resolutions.**

The Kansas City osteopathic association at a recent meeting adopted the following resolutions regulating methods of advertising and prices of treatment:

Section I. When called in consultation the discussion regarding the patient shall be with the attending physician and not the patient.

Sec. II. No osteopath shall solicit the patients of another either directly or indirectly, but if a patient should call another osteopath it is his duty to respond temporarily but later he should turn the case over to the osteopath attending the case regularly.

When an osteopath is called in consultation the charge for consultation shall be not less than \$5.00, the physician in charge of case to see that the consultation fee is paid.

Sec. III. The following schedule of prices are recommended: Regular monthly treatment (13 treatments) \$25.00. Office treatment, \$2.00 per treatment. Outside day calls, \$2.50. Night calls, \$3.00. Obstetrical cases, \$15.00, including two subsequent calls.

Sec. IV. It shall be unprofessional to advertise to cure, or to advertise in a misleading manner. All advertisements shall be plain so that any one can understand them, and shall only be of an educational nature. No extra side-lines shall be advertised as being a part of osteopathy, such as medicine, electricity, hot air, vibration, hypnotism, suggestion, etc.

## Minnesota Board All Right.

"I have lately taken the state examination in Minnesota and met not only a gentlemanly board but a practical osteopathic board. The examination was very fair and any one worthy of the title osteopath should be able to pass it without difficulty. There were ten applicants, three from Des Moines, six from the Minneapolis school, and myself.

"We have quite a strong state association, almost one hundred members I think—there are about 150 practicing osteopaths in the state. We have a good law and intend to keep it.

"Have opened an office here in St. Cloud. Dr. Cooper of the Minneapolis school is practicing here, but a city of 10,000 ought to support two and I intend to succeed. I am a lesion osteopath, and have advertised as ready for both acute and chronic work. Wishing all success to the A. S. O. this year, I am sincerely,"

URANIA T. JONES, D. O.

## To The Members of the Indiana Osteopathic Association

You are hereby reminded that the regular Annual Meeting of the "Indiana Osteopathic Association" will be held on Wednesday, November 11, at Hotel Claypool, in the City of Indianapolis. There will be three sessions—the first from 10:00 a. m. to 12 a. m.; second from 2:00 p. m. to 5:00; third, 7:00 p. m. to 9:00 p. m. At this meeting there will be the annual election of officers for the ensuing year—in fact this is the business session of the year.

There will be the same feature of reports of cases, which was of such important and special interest at our last meeting. You will not be disappointed in the program as it will be instructive and entertaining. We also have the assurance that Dr. A. G. Hildreth will be with us again to aid us in advancing the cause of the association and osteopathy.

The subject of an osteopathic law will also constitute one of the special features of the occasion. Its discussion and settlement thus early is absolutely necessary, so that we will be thoroughly prepared for work at the next session of the legislature.

This notice when sent to osteopathic physicians *not members* of the state organization will be equivalent to an invitation to attend.

Please arrange your business so you can attend and make this one of the most interesting and successful meetings ever held in the history of the association,

Fraternally yours,

CHAS. SOMMER, D. O., Pres.

GEO. TULL, D. O., Sec'y. and Treas.

## Connecticut State Meeting.

At a re-organization meeting of the Connecticut Osteopathic association held in New Haven on October, twenty-first, the following officers were elected for the ensuing year: President, Dr. A. H. Paul, Bridgeport; vice-president, Dr. W. A. Willcox, Waterbury; secretary, Dr. J. K. Dozier, Middletown; treasurer, Dr. Annie U. Anderson, Meriden.

The association intends hereafter to meet frequently for practical purposes, and as far as possible to work in harmony with the national organization.

The next meeting will be held in Meriden on November eighteenth.

J. K. DOZIER, D. O., Sec'y.

## Past and Present.

On chair and table and bed alas,  
Were spoons, inhalers, bottles and glass,  
This was my room as it looked at night,  
And friends fast bringing me more in fright.

For indigestion, no longer need  
The nux or soda, maltine or mead.  
No use in fever for aconite,  
For weary feelings no phosphite.

Tonics and syrups made an array,  
Mustard and cough drops all put away.  
No hot compresses on chest I fold,  
Or lard, or goose grease, I take for cold.

No digitalis, no whiskey too,  
What then is making the heart beat true?  
Who then with treatments can cure each ill?  
An osteopath from famed Kirksville.

The tangled nerves and the lesions trace,  
Treat from the spine and press bones in place,  
And lift ribs pressing on heart and chest,  
Thus bringing to patients good health and rest.

To Almeda J. Goodspeed, D. O., of Chicago.  
By a grateful patient.

## The Journal of Osteopathy.

PUBLISHED MONTHLY UNDER THE AUSPICES  
OF THE

AMERICAN SCHOOL OF OSTEOPATHY.

KIRKSVILLE, MISSOURI.

Subscription, - 50cts per year in advance.

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THE following states ought to pass laws regulating the practice of osteopathy at the next session of their legislatures: New York, Massachusetts, Pennsylvania, Kentucky, Alabama, Mississippi, Texas, Washington, Oregon, Utah and Colorado. This is by no means a complete list and does not include states where the existing osteopathic laws should be repealed and new ones passed. In most of the states above mentioned osteopathy has been practiced for a long enough time to become well established, and if the practitioners in those states organize early and all work together harmoniously and energetically they will sweep things clean.

\*.\*

THE fact that nine-tenths of the members of the medical profession don't know their own business is no excuse for the osteopath that don't know his. Every practitioner when he takes to the field after graduating should continue to be a student—study, read everything, cultivate judgment. Quit making exaggerated claims and mistakes in diagnosis. There is no excuse for it except ignorance. Study pathology so that you can treat more intelligently and prognose more correctly. Don't be afraid to read standard authors on surgery, on pathology,

on practice, on nervous diseases and so on through the full list. We have our own treatment, but their knowledge of diseased conditions is just as valuable and correct as what our standard authors have given us on anatomy.

\*.\*

WE recently received a letter from some ignorant fellow who calls himself a magnetic osteopath. This particular gentleman lives in Nebraska where he claims to be practicing osteopathy. The object of his letter was to receive information as to how he could get a diploma without attending school, stating that he was willing to pay liberally if the goods could be delivered. He stated that he had gotten his instruction in osteopathy from a school in Omaha that taught hypnotism and some osteopathy, and that he had read Barber's Book. Not being in a position to direct the gentleman to an institution like the one he was looking for we could be of no service to him. The Nebraska state osteopathic association should see that all who are practicing under the title of osteopathy in that state should comply with the law regulating its practice.

\*.\*

IN the October issue of the Osteopathic Physician, Dr. Joseph H. Sullivan of Chicago, in presenting his views on the "lesion" question which has of late been discussed pro and con with commendable zeal, said:

"I have watched with much interest the various opinions advanced by graduates under Dr. A. T. Still—who almost to a man hold to the lesion idea—and the somewhat grotesque adjuncts advocated by those of other osteopathic institutions, and I have finally been forced to the conclusion that there is something lacking in the osteopathy imbibed outside of Kirksville.

"I have always believed that my inability to find a lesion was my fault—not the fault of osteopathy, and I am of that opinion still. We read the ridiculous idea advanced by a credited graduate that no lesion other than a mental lesion existed in a certain case. May I ask: 'What material cause developed the mental lesion?' No effect without a cause, you know.

"Another claims that no lesion he could locate occasioned gall-stone colic; he brought relief by colonic flushing; will he ask me to believe that the colonic flushing corrected the hepatic congestion or anemia, which his flushing counteracted temporarily? I hope not.

"In some publications we read of heart disease without apparent lesions being relieved by pressure on the hypogastric plexus and now the 'woman treats herself.' Certainly, on second thought, the practitioner won't force us to accept her idea that no lesion or disturbance of the mechanical structure existed which caused the heart disturbance! I am of the opinion that if there is no lesion, either osseous or otherwise structural, there is no heart disease, no mental lesion, no gall-stone colic, etc., but, instead, there is perfect health—in short, if there were none of these lesions, we osteopaths would be engaged in other avocations. I think some of us should be at the present time.

"I know that there is ample work for the osteopath, and if he must also needs usurp the function of the trained nurse, that is his prerogative, but he must not rail against lesions, simply because he has found none, because he is lacking in skill.

"The osteopathic structure has its corner stone resting on the lesion, and you cannot budge it. A hundred years from now the structure will be colossal, but without question the same dissensions will be heard then—the few who charge the system with being defective, when the cause rather lies with themselves."

The first part of Dr. Sullivan's contribution brings up the question, "Are Kirksville osteopaths different from those who received their education elsewhere, and is Kirksville osteopathy of a different brand from that dispensed second or even third handed at other schools?"

It is a noticeable fact and one that is often spoken of at the different osteopathic conventions that when such questions as the lesion and similar ones are being discussed, it can be determined without difficulty where the various speakers did or did not receive their osteopathic instruction. Naturally, the A. S. O. graduate is a lesion

osteopath every time. Dr. A. T. Still's teaching has made such an impression upon him that he is a firm, tenacious believer in the principle of the universal anatomical lesion associated with disease. He comprehends the first principles of osteopathy. He has a working basis wide enough to make the application of osteopathic principles almost universal.

We furthermore venture the assertion that the practitioner who does not comprehend the lesion theory and does not administer treatment to adjust lesions is no osteopath and ought not to be classed with them.

The tendency of adjunct treatment is, as Dr. Sullivan says, for the osteopath to disregard the real cause of disease (lesions) and to assume the role of a trained nurse. Such work may be necessary, and if so should be advised, but it ought not to be administered by the osteopath who should direct his work to that part of the treatment that requires real skill—we refer to the detection and adjustment of lesions. Let the trained nurse do the colon flushing, bathing of the patient and such other duties as may be required of her under the direction of the physician.

Dr. Emilie L. Greene of Detroit, whose articles on "Pelvic Diseases" appears in this issue states her position on adjunct treatment for female diseases in a manner that appeals to us as being exactly correct. After stating that the principal part of her work in treating diseases of women is to correct structural abnormalities, she further states that she often gives advice in regard to matters of diet, exercise, baths and etc., but that she does not administer the baths herself.

In conclusion we will state that it would seem presumptuous to state that all the good, real osteopaths are from the A. S. O., and we do not make such a statement, for we personally know of a large number of successful practitioners who understand and apply the true principles of osteopathy, as well as a lot of the other kind, who are from other schools. But we do assert that only those who comprehend osteopathic principles, and practice them as taught by Dr. A. T. Still, whether from the A. S. O. or elsewhere, are the only real kind.

Dr. Lynn Van H. Gerdine, A. B., A. M., D. O., the new professor of physiology, pathology and bacteriology at the American School of Osteopathy, while still a young



man, brings to his new position years of study and experience.

Born in Mississippi in 1873, he graduated from the University of Georgia at the age of twenty-one with the degree of A. B. Immediately after his graduation, he went to Germany where he spent the next year and a half in further study at the universities of Bonn and Berlin. On his return to America, he entered Harvard University as a post-graduate, receiving the degree of A. M. in 1898.

It was during his course at Harvard that his attention was first called to osteopathy. Although born of a family of physicians and naturally possessing a sentimental inclination toward the practice of medicine, it was not until an intimate friend in his class at Harvard first interested him in osteopathy that he definitely made up his mind as to the profession he should follow.

With this intention in view, he entered the Boston Institute of Osteopathy, graduating in February, 1901. In order to make up for the lack of clinical and laboratory work, he entered Rush Medical College at Chicago, taking the entire laboratory course in anatomy, physiology, pathology, histology, chemistry and embryology. In connection with his studies at Rush, he did clinical

work at the County and Presbyterian Hospitals in Chicago under Prof. Billings. The year following he attended the medical school of Harvard University, making a specialty of physiology and pathology. Immediately after his graduation he engaged in pathological work at the Long Island Hospital in Boston Harbor which he left to accept his present position with the American School of Osteopathy, where he has proven himself to be a practical and popular instructor.

\* \* \*

#### Are YOU the One and Only?

Doctor, do you desire fame? Are you hungry for pre-eminence? Do you have that empty-but-want-to-be-filled sensation which animates the politician when he so graciously shakes your hand just previous to election? In short, do you want to be IT? If so send to the promoters and get your name enrolled among the mighty for two dollars. Send early and avoid the rush—another man will be IT if the post-mark on your envelope doesn't show your speed.

We have recently read in the *Saturday Evening Post* a series of articles on "Fortunes and Freaks in Advertising." There may be fortune, there is unquestionably much of the freak in the new scheme of advertising to which our attention has recently been called. The situation may be rendered more clear by reference to the following copy of a circular letter which is sent out to one osteopath in each city:

"DEAR DOCTOR: The frequent calls upon us to recommend competent osteopaths to our patients who may be going away, or who may desire that friends or relatives elsewhere should try osteopathy, suggested this plan of printing the enclosed folder. It gives the names and addresses of "consulting osteopaths" in many cities, with the idea of promoting a spirit of reciprocity and good fellowship, so essential to mutual success and conducive to new practice and desirable patients.

If each one will recommend the others, very much may be accomplished for all. Only one osteopath for each city. Won't it pay you to be THE ONE OSTEOPATH IN YOUR

TOWN? If the plan has your approval and you want these folders sent out with your name on them and 100 forwarded to you, please advise AT ONCE, inclosing \$2.00. IMMEDIATE RESPONSE is necessary for prompt publication. If I do not hear from you by RETURN MAIL the offer will be extended to another osteopath in your town.

Yours fraternally,

\_\_\_\_\_, D. O."

If the names on the card enclosed with the circular are those of practitioners who have given their sanction as well as their names to the scheme—we hope they are not—we feel like quoting scripture and exclaiming with David "how are the mighty fallen." After having successfully dodged the patent medicine dodger's scheme, resisted the irresistible picture-in-the-corner-of-the-daily-paper methods of the fakir, and even refused to give out paid-for interviews, it is sad to see the victim pitch headlong into the open trap of one who knows that the weakness of man lies in his desire to be exclusive.

Is it necessary to argue the question as to the legitimacy of this scheme? Is there any one in the osteopathic ranks who giving even the most trifling attention to the subject will yet fail to see the injustice, not to say the ridiculousness, of the entire scheme? One man in New York, one man in Chicago, one man in each city recognized, and all others ignored—for two dollars. What does the promoter know as to the qualifications of those whom he indorses? What does each man whose name appears on the card know of each other man whose name keeps company with his? What do these know of those countless others whose names are not mentioned? Nothing. This is not merely a question of form, or of etiquette—it is a question of justice. Do we need a code of ethics? At one time we were somewhat opposed to a formal declaration of professional ethics. We hereby give testimony to our complete conversion. We need a code of ethics—a code of morals.

\* \* \*

#### Who Will Solve This Problem?

We are in receipt of the following from one of the graduates of the American School,

and publish it in order to call attention to a question that has caused much vexation:

\_\_\_\_\_, KANSAS, Sep. 12, 1903.

EDITOR JOURNAL OF OSTEOPATHY,

KIRKSVILLE, MO.

DEAR SIR: After one and a half years of toil in trying to build up a practice in this county, and after having made a number of friends for our cause, I am confronted with a new difficulty. About July 1st, Dr. \_\_\_\_\_ located in my town, and without consulting with either Dr. \_\_\_\_\_ or myself, announced that she would treat for \$1.00 per treatment.

Now what should Dr. \_\_\_\_\_ and I do? Answer through the Journal if you wish.

Respectfully yours,

\_\_\_\_\_, D. O.

The question of a proper valuation of the physician's service to his patrons is one that permits of no absolute answer. The advisability of reducing prices or raising them from the usual standard is governed by many circumstances. What is a proper remuneration in one community, or from one individual could easily be an injustice in another location or from another person. The cost of living in one locality is much greater than in another, more attention to office appearance must be given in some cities than in others. These considerations are legitimate factors in determining the rewards for services rendered.

There is no question that every practitioner will be called on to exercise his judgment wherever he may locate. In his decision he must take notice of other factors than his own personal considerations or those of his patient. He must recognize the claims of the profession which he represents, and of that part of the profession which is represented by the other local practitioners. In this latter respect, at least, we are certain that the doctor referred to in the letter above noted erred very seriously. If the practitioners earliest in the field have succeeded in establishing a more or less definite standard, then the later arrivals should, unless extraordinary reason dictate otherwise, conform to that standard. Certainly the dictates of common decency and sociability should suggest the propriety of a frank consultation of the established

practitioners by the new arrival. Under no circumstances should the cut in prices be made as a competitive measure. In the present status of osteopathy there is absolutely no justification for it.

The columns of the Journal are open for further suggestions relating to the solution of this problem.

\* \* \*

The Alabama Situation Again.

EDITOR JOURNAL OF OSTEOPATHY,

Kirksville, Mo.

DEAR SIR:—We are wondering if the members of the profession have all read in the October "Osteopathic Physician" the article entitled, "Another Defeat in Alabama," if not they should read it, especially that part of it entitled—"An Opportunity for Good Fighting That Was Lost." We also ask that you refer to your May number of the same paper and read the article entitled "Alabama Medical Law as Passed May be Satisfactory." This article was the greatest stumbling block in the way of success in Alabama, coming as it did from a man occupying the position of the writer of that article and then published in the official bulletin of the American Osteopathic association. It made an argument for the enemy in defense of their nefarious existing unjust medical law that was almost unanswerable, and we question seriously whether the colossal brain and eloquent tongue of the editor of the "Osteopathic Physician" would have been equal to the emergency and been able to have turned his gross blunder into a boomerang for the good of our profession as was intimated in his article.

Don't you feel it took some gall to come out in a paper occupying the position of the Osteopathic Physician and undertake to place the burden of its mistakes upon the shoulders of some one else?

While it might be true that the "jaded fighters" upon this occasion did overlook their golden opportunity, for the men and women of our profession who conducted the long drawn out and unequal contest in Alabama have had plenty to tax their strength and endurance to cause them to overlook some of their best opportunities, yet, I wish to say after eight years of ex-

perience in this work that no where have I yet found the work more thoroughly, conscientiously, and effectively done than in Alabama. And it would be an injustice to our profession and especially to our little band of able workers down there to let this pass without a full knowledge of the facts in the case. Every influence possible was brought to bear, everything was done that could possibly have been achieved by those who conducted the fight. And to Mrs. Ellen Barrett Ligon, a name that is synonymous of all that is good and best for our profession, it is due to say that she conducted her part in that campaign, as she has always done, with a masterly hand. Every one who knows her knows full well that her work not alone in Alabama but in other states has been invaluable to the profession. She has added strength to our cause wherever she has been, not alone by the dignity and power of her presence but by the wisdom and good judgment of her counsel. Now, Mr. Editor, this article is written with malice toward none but in justice toward all. I do not question the motives of the Editor of the Osteopathic Physician, nor do I believe he would intentionally do other than that which he thought to be for the best good of the profession, but I do question his judgment and deplore his effort to place the burden of his own mistakes at the door of some one else.

A. G. HILDRETH., D. O.

St. Louis, Mo., Oct. 30, 1903.

#### Northwestern Illinois Association Organized.

At a meeting held in Dixon October, 22, of the osteopathic physicians practicing in northern Illinois, the Northwestern Illinois Osteopathic association was organized with a membership of twenty-three. Meetings for mutual benefit will be held every three months at different points in the district. The next meeting will be held in Chicago, January 7th, 1904. The following officers were elected: President, Dr. E. L. Denniston, DeKalb; vice-president, Dr. J. E. Mosier, Walnut; secretary and treasurer, Dr. R. M. White, Freeport. Executive Committee: Dr. E. M. Browne, Dixon; Dr. F. E. Stewart, Prophetstown; Dr. C. O. Deeming, Rock Falls.



**Dr. Hulett's Book.**

The Principles of Osteopathy by Dr. G. D. Hulett, professor of Principles and Practice of Osteopathy at the American School, is the latest osteopathic work presented to the profession for consideration. It is a notable fact that although there are but few books from osteopathic authors as yet, still each new one, when coming from a reliable source, seems to be an advance over all that have appeared earlier. The worth of the book commends it. It contains in our opinion the best exposition of osteopathic principles of any thing yet published. The author's meaning is clear and his explanations are clothed in such concise language that there is no mistaking his meaning. The book has 366 pages and the work is presented in two parts.

Part one treats largely of the theory of causes of diseases in a general way from the osteopathic view point, and part two takes the work up practically and specifically, dealing with each part of the body separately.

The work shows the author to be thoroughly grounded in the first principles of osteopathy so essential to the proper conception of the science. The price of this book is \$3.00. For sale by the author.

\* \* \*

WHAT will become of the M. D., D. O.? He ought to be put into a class to himself and no doubt will be if he attempts to practice osteopathy and medicine combined. Every state association should adopt the plan of the Illinois association and refuse such practitioners admittance into their state associations. The study of medicine on the part of osteopaths should be discouraged, especially so when graduate osteopaths can further qualify themselves by taking post-graduate work in our osteopathic schools. Medicine and osteopathy as therapeutical agencies have nothing in common, either theoretically or practically, and only an inconsistent physician will attempt to practice both. Osteopathy does not need to be bolstered up by the use of any therapeutical knowledge to be learned at any medical school. Every state association should adopt such rules as will require the resignation of all two-faced practi-

tioners and prevent them from being taken in hereafter. Osteopaths cannot afford to compromise their position in regard to drug medication and should bar from their associations all mixers and their ilk, who honor neither the profession of osteopathy nor medicine.

Rensselaer, Ind., can boast of one family whose most peculiar characteristics are their proneness to become doctors. This family recently had a reunion of its various members and there were more doctors there than at any other one household in the state of Indiana. With the coming home of Mr. and Mrs. Thomas Robinson's son and daughters, there were no less than ten doctors in the family. Another peculiar feature is that of the ten doctors, nine are of the osteopathic character and only one a regular medical doctor. This latter being Dr. D. C. Hinshaw, the latest groom in the family. They are Dr. and Mrs. D. C. Hinshaw, Dr. and Mrs. J. J. Schmidt, Dr. and Mrs. Albert Overton, Dr. and Mrs. S. C. Robinson and Dr. and Mrs. Jesse Francis.

**Football at the A. S. O.**

The past month has been a strenuous one for the football boys. On Sept. 30th they journeyed to Champaign, Ill., where they went down to defeat at the hands of the University of Illinois by the top-heavy score of 36 to 0. The game served to bring out the good and bad points of the team and a general shake-up resulted. The re-organized team showed great improvement in their game against Knox College which they defeated on Oct. 10, 17 to 0. On Oct. 21st they met the University of Wisconsin, one of the strongest teams in the West and made a highly creditable showing although defeated 32 to 0.

On Oct. 24, at Kirksville the boys met the S. S. Still College, the game resulting in a score of 74 to 0 in favor of the A. S. O.

The San Francisco Evening Post of recent date contains the statement that Dr. Audrey C. Moore of that city will found a Sanitarium and Osteopathic College in that city in the near future.

**PERSONAL MENTION.**

Dr. Myrtle D. Edwards of the June class, 1903, has located at Winsdor, Mo.

Dr. H. A. Glenn has changed his location from Dover to Phillipsburg, N. J.

Dr. W. I. Joss has recently located at 1903 Park Ave., Philadelphia, Pa.

Dr. C. E. Stevenson formerly of Brooklyn, Ia., is now located at Karney, Nebr.

Dr. J. E. Snyder has changed his location from Valentine to Chadron, Nebr.

Dr. Fannie Springmire changes her location from Bosworth, Mo., to Hale, Mo.

Born—On Sept. 30th to Dr. and Mrs. J. B. Kissinger of Rushville, Ind., a daughter.

Dr. A. B. Waters has changed his location from Lincoln, Nebr., to Falls City, Nebr.

Dr. A. B. Cramb has changed his location from Beatrice, to 1134 L. St., Lincoln, Neb.

Born—To Dr. and Mrs. W. J. Rhynsburger of Dayton, Ohio, on Sept. 24th, a daughter.

Dr. J. F. Knox formerly of Bedford, Ia., has recently located at Whatcomb, Wash.

Dr. L. W. Allen of the last graduating class has recently located at Middleburg, Vt.

Dr. Mallie Abnerthy has recently located at Goodfood, Miss. She formerly practiced at San Marcus, Tex.

Dr. Lytton Gray Ament announces his permanent location at the Grand Hotel, Cincinnati, Ohio.

Dr. L. I. Knapp of the June class 1903, has recently located at 5 W. 34th St., New York City.

Married—Oct. 14th at Grinnell, Ia., Dr. U. M. Hibbetts and Miss Ida Bell Gordon. Both of that city.

Married—On Oct. 4th, at Tremont, Ill., Mr. James Dean and Dr. Myrtle Leonard. They will reside at Tremont.

Dr. J. L. Hively of Elkhart, Ind., recently moved into his new offices in the Curtis Bldg., 416 S. Main St.

Dr. Clara M. Covert formerly of Mound City, Mo., has recently located at 804 E. 14th St., Kansas City, Mo.

Dr. D. L. Clark of Sherman, Texas, has recently changed the location of his offices

from 456 S. Crockett St. to the Murphy Bldg. Dr. Clark reports a good healthy sentiment in his community for osteopathy and a good practice for himself.

Dr. Caroline Beardsley Martin announces her permanent location at 268 W. 9th St., Los Angeles, Calif.

Dr. Chas. C. and Grace H. Teall announce their removal to The Imperial, Bedford Ave. and Pacific St., Brooklyn N. Y.

Dr. W. H. Cobble formerly of Hartington, Nebr., has recently changed to Bloomington, same state.

Dr. F. C. Holgate has changed his location from Jackson, Ohio, to 625 Monroe St. Chicago.

Dr. Benj. V. Sweet announces the change of his location from Attleboro, Mass., to Suite 18 Journal Bldg, Lewiston, Me.

Dr. Emilie L. Greene of Detroit, Mich., announces the location of her new offices, Suite 305-6 Ferguson Bldg.

Dr. W. R. Byars until recently of Maryville, Mo., has gone to Redlands, Calif., where he will practice.

Dr. Bolling L. Blocker has recently opened an office in the Chamberlain Bldg., Chattanooga, Tenn., for the practice of her profession.

Dr. Dale Craig formerly of Smithville, Mo., has gone to Plattsburg, Mo., where he will practice in partnership with Dr. C. E. Boxx.

Dr. H. A. Tucker formerly of Talihina, I. T., announces his change of location to Springfield, Mo. His offices in the Baldwin Bldg.

Dr. O. Densmore, late of the faculty of the Atlantic College of Osteopathy of Wilkes Barre, Pa., has located at 1213 Rhode Island Ave., N. W. Washington, D. C.

Dr. S. D. Pemberton has recently changed his location from Newport, Vt., to Springfield, Mass. He has offices at 10 Chestnut St. in the Kenson Bldg.

Drs. Pleak & Pleak have sold their practice at Du Quoin, Ill., to Dr. A. I. Ross of Mt. Vernon, Ill. The former go to Lake Charles, La., to engage in the practice of osteopathy,

Drs. Forbes, Hoffman, Spencer and Capt. Kelton of Des Moines, Ia., were recent visitors of the A. S. O.

Dr. John C. Herman will open his winter office in Daytona, Florida, Nov. 10th. He has been practicing during the summer at Magnetic Springs, Ohio.

Dr. C. A. Upton of St. Paul, was recently elected secretary of the Minnesota association instead of Dr. Huntington as was reported in the last issue of our JOURNAL.

The state osteopathic society of New York held its annual session in the Waldorf Astoria, Oct. 28th. The report of the meeting will be given in our next issue.

The New Jersey osteopathic society held its third annual meeting at Newark, Oct. 31st. A full report of this meeting will be given in our next issue.

Married—On Oct. 14th, at Prophetstown, Ill., Dr. George B. Wolf and Miss May Green. They will make their future home at Paola, Kas., where the Doctor has established a practice.

Married—Oct. 28th at Omaha, Nebr., Dr. J. L. White and Miss Elizabeth Bedford. They will be at home after December 1st, at Henry, Ill., where the Doctor is located.

Dr. E. E. Henderson of the last graduating class has formed a partnership with Dr. H. C. Montague of Muskogee, I. T. Dr. Henderson formerly practiced at Lexington, Mo.

Dr. F. W. Sherburne after two months vacation in Europe, has returned to his practice in Boston. Dr. Sherburne is now entering upon his sixth year in the practice at the above named place.

Dr. Lee C. Deming and his wife, Dr. Edith H. Deming have recently located at Los Angeles, Calif., with offices in O. T. Johnston Bldg. Dr. and Mrs. Deming have been practicing during the past summer at Lost Soldier, Wyo. We expect to hear of their success in their new location as we feel they are specially prepared to do a successful practice. Dr. Deming is not only a graduate of the A. S. O. but in addition he has taken the post-graduate course and for sometime was a member of the regular operating staff at the A. T. Still In-

firmatory. In addition both he and Mrs. Deming have taken work in Chicago in surgery, dissection and gynecology.

Dr. Lillian G. Ballance until recently of Yuma, Ariz., has gone to Pasadena, Cal., where she has accepted a position in the South Pasadena Sanstarium conducted by Dr. D. L. Tasker.

Dr. A. D. Mahaffay until recently of Cheyenne, Wyo., has purchased the practice of Dr. A. E. Braden of Waitsburg, Wash., where he has gone to locate. Dr. Braden we understand goes to Chicago to take up the study of medicine.

Born—On Oct. 22nd to Dr. and Mrs. G. H. Tuttle of Portland, Me., a daughter. This is the first osteopathic baby in the state of Maine and the mother was attended during confinement by Drs. Sophronia T. Rosebrook and Florence A. Covey, two A. S. O. graduates.

Dr. Edward N. Hansen has changed his location from Geneva, Nebr., to Pittsburg, Pa. Dr. and Mrs. Hansen recently suffered the loss of their two year old baby. The Journal and their many friends extend sympathy.

Dr. Brown Godwin of Fulton, Ky., died on Oct. 16th, after a short illness of heart trouble. Dr. Godwin was a graduate of the A. S. O. class 1899. He was a Christian gentleman and was a successful practitioner. The JOURNAL extends sympathy to his bereaved friends and relatives.

Mrs. Kate Ross, wife of Dr. C. E. Ross, of Ft. Smith, Ark., died Oct. 18th, at Bloomfield, Ia., after a lingering illness of several years. The remains were brought to Kirksville where burial took place. Dr. Ross has the sympathy of his many friends in this his irreparable loss.

The association in the practice of osteopathy of Drs. Achorn and Ellis at 178 Huntington Ave., will be dissolved on Nov. 1st, 1903, by mutual agreement. Drs. C. E. Achorn and Ada A. Achorn will continue to practice at 187 Huntington Ave. Dr. S. A. Ellis will remove to 144 Huntington Ave. Corner of West Newton St., where he will be located for practice. Dr. Irene Harwood Ellis will be associated with him in the practice.

## DISEASES TREATED.

Osteopathy successfully treats all curable diseases, and many formerly regarded as incurable. In its way it reaches many conditions of hitherto unknown nature, not classed under the ordinary headings of disease.

**Diseases of the Digestive System:**—Tonsillitis; Pharyngitis; Spasm of the Oesophagus; Catarrh of the Stomach and Intestines; Dyspepsia, gastric or intestinal; Gastric Ulcer; Neuralgia of the Stomach or Intestines; Constipation; Diarrhoea; Dysentery; Colic; Cholera Infantum; Cholera Morbus; Appendicitis; Tape-Worm; Peritonitis; Dropsy of the Abdomen; Jaundice; Gall-Stones; Cirrhosis of the Liver.

**Diseases of the Kidneys:**—Bright's Disease; Renal Calculus; Floating-Kidney; Pyelitis; Hydronephrosis.

**Diseases of the Blood and Ductless Glands:**—Leukemia; Anemia; Chlorosis; Exophthalmic Goitre, and other forms of Goitre.

**Diseases of the Circulatory System:**—Dropsy; Pericarditis; Endocarditis; some cases of Valvular Disease; Hypertrophy or Dilatation of the Heart; Angina Pectoris.

**Diseases of the Respiratory System:**—Colds; Catarrh; La Grippe, or Influenza; Laryngitis; Croup; Bronchitis; Asthma; Hay Fever; Pneumonia; Consumption; Pleurisy.

**Infectious Diseases:**—Typhoid, Malarial, Scarlet, and other Fevers; Measles; Chickenpox; Smallpox; Erysipelas; Diphtheria; Whooping Cough; Mumps; Dengue.

**Constitutional Diseases:**—Rheumatism, of all kinds; Rickets; Diabetes.

**Nervous Diseases:**—Paralysis; Convulsions. Epilepsy; Neuralgias; Muscular Atrophies; Somnambulism; Catalepsy; some forms of Insanity; Cerebro-Spinal Meningitis; Apoplexy; Locomotor Ataxia; Neuritis; Sciatica; Facial Paralysis; Vertigo; Nervous Prostration; St Vitus Dance; Writer's or Pianist's Paralysis, and the Occupation Neuroses; Thomsen's Disease; Sunstroke.

**Drug Habits:**—Alcoholism; Cigarette Habit; Opium and Morphine Habit.

**Skin Diseases:**—Eczema; Shingles; Psoriasis, etc.

**Spinal Diseases:**—Curvatures; Old Dislocations, and all Deformities; Lumbago.

**Diseases of Women:**—Irregular, Painful or Suppressed Menstruation; Displacements of the Womb; Leucorrhoea; some forms of Barrenness; Milk Leg; Ovarian Disease.

**Diseases of Men:**—Spermatorrhoea; Sexual Debility, or Impotence.

**Some Forms Of:**—Deafness; Blindness; Atrophy of the Optic Nerve; Retinitis; Weak Eyes; Short or Long Sightedness; Astigmatism; some cases of Cataract; Granulations; Discharges from the Ear; Noises in the Ears.

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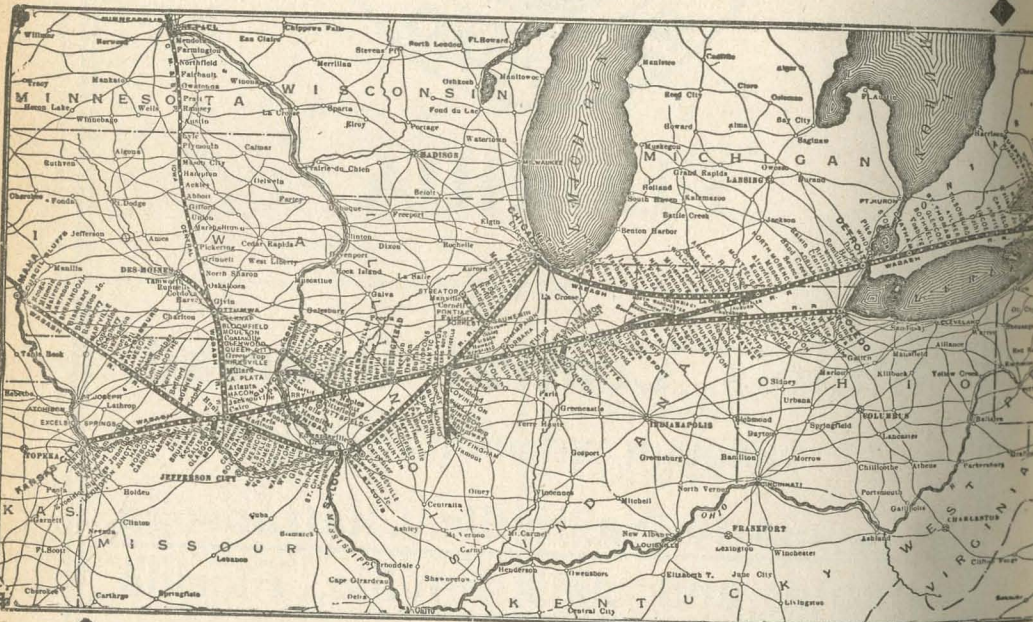
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