*THE GROWTH OF OSTEOPATHY.

DR. A. T. SULLIVAN.

Dr. Still, Members of the Faculty, Fellow Students and Friends:

It is with a deep sense of the honor conferred upon me that I appear before you this evening, and as representative of our class I feel it is my duty to apologize for them in having elected me to address you when there are so many others among us eminently better fitted for the rostrum than myself.

A month ago today we commemorated the fourteenth anniversary of the institution of this, the first school of osteopathic therapeutics, and it is my purpose to consider briefly the progress of osteopathy from the cradle to its present condition of energetic youth. It is true fourteen years is comparatively a short time to recount as history, but thanks to its careful nurses here in Kirksville you and I have seen this babe of nature wax stronger and stronger 'til now like the child Christ amidst the doctors in the Temple, we behold his teachings have overthrown dogmas which had prevailed from time immemorial.

Do not imagine that it is my intention to launch forth a tirade of vituperation upon the medical profession as such is remote indeed to my purpose. Progress may only be judged by comparison and I will confine myself strictly to historical facts.

Few of us stop to consider the actual progress which our science has achieved and only when we go back and examine medical history can we appreciate with what phenomenal rapidity this truth is becoming manifest. The history of the circulation of the blood affords an eminent example, inasmuch as it required thirty-five years for Harvey to convince his learned contemporaries of the simple fact that our blood was not stagnant like the juice in an orange. Hume, the historian, asserts that no physician in Europe who was then forty years of age ever to the end of his life admitted the circulation of the blood, and make note: Harvey then occupied one of the highest positions in his profession, being physi-
of his perverted imagination. Osteopathy instead makes one realize
that he had not been so taught there would certainly be no necessity for treat­
ing patients. That the bread pill has a psychic effect upon some patients no one
will deny, but why mislead the invalid into believing his nature is so
weak, so imperfect that it is dependent upon such means for recuperation.
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It is maintained by others that drugs were divinely instituted, yet
I cannot conceive upon what such a claim is based unless it be the passage
in the Old Testament where the Lord appeared to Moses on Mt. Sinai

and gave him two tablets.

The osteopathic diagnosis being such that the cause and treatment of
disease are readily comprehended by patient as well as physician, is
surely another evidence of progress. The ancient Greeks and Romans
fully understood the vital necessity for a medical doctor writing his pre­
scriptions in characters unintelligible to the patient. Pliny, in his writ­
ings, says that the Romans who studied medicine realized the necessity of
writing their prescriptions in Greek because if they should attempt to
treat disease in their own language they would certainly lose all credit.

Only a few months ago Grover Cleveland appeared before one of the
eastern medical associations and pleaded for a clearer understanding be­
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been ignored. The osteopath holds no conjurer's wand over the helpless
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Andrew Taylor Still, leaving their ranks, took the stand in her behalf, and, having the courage to fight for his convictions, we now behold Nature vindicated. Well does he deserve the title of "The Lincoln of Mankind." Osteopathy's progress has attracted the eyes of the world and its effect is everywhere apparent. Throughout the universe we now hear the physicians of other schools raising the cry: "Back to Nature." It is what they call the slogan of the twentieth century, and no wonder, for having reached the antipodes, they, like the prodigal son, realize that they must return to their mother.

The consideration of our progress would not be complete unless proper credit be given to our coterie of generals who have so completely equipped and reinforced our ranks. During the slow, dreary period of our incubation their patience and long-suffering has been superhuman. Each has contributed in making Kirksville a place we will ever hallow as one of the brightest spots in our lives and it is our heartfelt prayer that the knowledge acquired through their earnest efforts may earn for us a plane in life as high as that which they enjoy.

In closing permit me to say that while the victories we have registered are glorious indeed, it is not yet time for us to rest our oars. Our proud ship osteopathy is today riding on the turbulent sea of drugs and has successfully breasted its fiercest storms. There is nothing to fear from without; our only danger lies within, and, as eternal vigilance is the price of safety, it behooves us to keep a careful watch lest our good ship should spring a leak or our enemies succeed in scuttling her. Remember that Nature is at the helm and so long as we stand by Captain Still we cannot fail to reach the harbor of success.

OSTEOPATHY—AN INDEPENDENT PROFESSION.

DR. GEO. M. LAUGHLIN.

I have chosen for the subject of my address to you to-night, "Osteopathy, An Independent Profession," and will supplement what I have to say upon this subject with some practical points along the line of practice that may be of some use to you when you enter upon your work in the field.

For the future of osteopathy I hold the most optimistic views, not, I think, based upon sentimental grounds, but upon a record made by the system I have the honor to represent, from the time of its founding to this date. Sentiment has no place in determining the value of facts and it therefore has no place in science, but it has a place in man's life, without it all of us at times would feel the need of something that cold facts could not supply. I, and all of you, entertain the highest appreciation for the memories that linger about this institution in our personal relationship with one another, and with the Old Doctor. But friendship and charity and fraternity, although essential to joyous living, do not make a science. They have been incidental in the growth of osteopathy, not fundamental.

To what can we attribute the success we have thus far attained? To the anatomy we have learned? No, the anatomy we now know, came from the medical profession and there were good anatomists before osteopathy was discovered. To the physiology we have learned. Physiology like anatomy, we as a profession, have fallen heir to. To the surgery, the pathology, the symptomatology, we have borrowed? These are all essentials, but they were all well known before the day of osteopathy.

We owe our existence and success to the discovery of Dr. Still, that disease comes from or is associated with mal-position of structure and that by correcting such abnormality, disease is cured. The truth of that principle has been the fundamental element in the growth of our profession. That principle contains the soul and substance of what we represent; it is the foundation upon which we stand as an independent system of healing. By demonstrating its truth, we have won the public favor and the enmity of the medical profession. Those of our profession who have adhered to it and who have been able to skillfully apply it, have reaped the reward of honor and competence.

I would, to-night, inspire in you a confidence in that principle and in our science, not based upon false claims, but upon the thousands of cures that have been made by the application of that principle in cases that would have otherwise remained in the list of incurables.

A new etiology and a new treatment constitute that which is new and peculiar to osteopathy. As a basis for the proper application of our diagnosis and treatment, we must look to the accumulated scientific knowledge of the past. Anatomy, physiology, pathology, symptomatology and a knowledge of the clinical history of diseases are absolute essentials, and we must know them to get the best results from our principle when applied.

Osteopathy is day by day passing from the experimental to the scientific stage. As the knowledge of our practitioners is becoming larger in essential subjects and as our experience in the treatment of diseases is becoming greater in practice, we have accumulated, assorted and combined facts so that we can tell with a reasonable degree of certainty, the prognosis under osteopathic treatment, in the various diseases.
A science knows its possibilities and limitations, and osteopathy is gradually reaching that stage, but there is much to be done yet, and it is incumbent upon us all alike to continue our investigations in an unprejudiced manner in order to bring out such truths that we do not as yet possess. False claims injure our system, a truth even though it be to acknowledge the failure of our practice in certain cases, enhances its scientific value.

Osteopathy has its limits; you will have your failures and disappointments, there are many incurable diseases that osteopathy can do little or nothing for, but after all it benefits and cures so many diseased conditions that the other systems can do nothing for, that it needs no false claims to bolster it up. The achievements of the past are sufficient to give osteopathy an independent and permanent existence.

In the lines that we have wrought, our success has been signal and most satisfactory, but our profession is not yet as well rounded as we hope and expect to make it in the coming years.

I look forward with great expectations to the time when osteopathy as a profession will be entirely independent from the medical profession. I do not mean by this statement that we should belittle or hold any prejudice against that system or the members of that profession, but that in order to make our position the securest possible, we must have within our ranks, men and women educated in osteopathic colleges who are competent to take charge of, and treat cases that belong to every line of practice.

The great bulk of your work and mine, even though we do a general practice, in the future as in the past will consist of the correction of lesions. It is not expected that we all become proficient in every special line, but we must have within our ranks, our own surgeons, our obstetricians, our gynecologists, our dermatologists, our oculists, our neurologists, our pathologists, and they all must be osteopathic from the ground up, educated in our own schools.

So long as we require the services, in practice, on any case of whatever nature, of a man with a medical education, we are not as a profession, entirely independent. We accept from the medical profession, and incorporate into osteopathy that which may be of use to us, this eliminates drugs as internal medicines, but it includes not only a vast amount of scientific knowledge and that part of the surgical art that is not distinctly osteopathic in origin and perhaps many other useful practices. When osteopathy eats chicken, it no longer remains chicken, but becomes a part of osteopathy.

I have simply referred to these things to better picture to you the brilliant possibilities of our professional future. I predict, and with reason for my belief, that within the next decade, all I have pointed out as needful to complete our independence, will be realities, and when that time comes, osteopathy will be the most complete, well rounded and independent system of healing on earth. I have an almost unbounded confidence in the science of osteopathy inspired in me by my experience in the practice, and as that experience enlarges, my confidence becomes greater. I am as certain of the correctness of the osteopathic theory as I am of any other fact of which I have knowledge.

Enthusiasm is essential to the success of any undertaking and confidence in yourselves, if you are properly prepared and have a right to have it, and in your science, will aid you in your work; but enthusiasm and confidence not based upon substance or properly guarded, will either place you in a most ridiculous position or change your confidence to a lack of faith, in some of your early failures.

A knowledge of the history and pathology of disease will forewarn you, and from it you will know when and why failure may be expected even though your work may have been skilfully and well done. Our failures have shaken us all at times, some of our practitioners have even taken a medical course in the hope of finding a treatment that might do better, in some cases, than osteopathic, but almost without exception, they have returned with renewed faith to the osteopathic practice.

In a recent conversation with a graduate of this school who afterward had taken a four years' medical course, he frankly told me some of his experiences. In his early practice he had failed to cure diseases that are known as incurable. He thought perhaps that medicine might do better. After he had taken the medical course, he discovered that medicine did so much less than osteopathy for the diseases upon which he had not had the success he desired, that he returned to his osteopathic practice with no little satisfaction. He is an honored member of the profession to-day and one of the ardent advocates of the osteopathic theory and practice.

Where osteopathy is properly taught and comprehended, there is little fear of it afterwards being uprooted by medical tendencies, although I dislike very much to see an osteopath show such lack of confidence in his own system as to take up the study of medicine in a medical college, even though he may return afterwards to the osteopathic practice.

We must not, and do not oppose the acquirement of useful knowledge, but it must be acquired with the end in view of applying it, and for an osteopath the place to acquire that knowledge is in an osteopathic school. When experience shows us that our course of instruction is too
limited in certain respects, it will be changed to suit the demands. Time alone will furnish the test and the good and useful will be embodied into our methods and the false and useless discarded.

We represent a principle that we know is true and we need all the knowledge obtainable to apply it with understanding, and it is the duty and purpose of the school from which you are about to graduate, to make it available.

I cannot help but feel that you have good prospects ahead. There is a demand for skilled osteopathic services a hundred times greater than the supply. Demand can be created just when you demonstrate a superior article. Although the great masses of the people have become so accustomed to taking medicine that it is done without reason, the age of the custom vouching for its correctness, still there are thousands of thinking people who through disappointment in the results of drug taking are willing to accept a reasonable substitute that offers the hope of relief. And then nowadays, too, there are thousands of people who have become educated in the osteopathic way and take osteopathy first handed, not waiting to give medicine a chance to do the harm that it is capable of doing. Your success then, will depend upon your results; satisfied patients will give you a good professional reputation.

The ambition of every member of this class should be to uphold the honest claims of your system. Every member of our profession is morally bound to uphold and defend the science of osteopathy and I would impress upon every friend of the practice within the hearing of my voice that at all times and places, he should guard the honor of our science as he would the honor of his own household. Attacks should be answered with force and dignity. Make it a point to explain osteopathy to those desiring to learn about it and to those who are allowing the statement that osteopathy is massage or rubbing to go uncorrected if made in your presence.

Do not accept an inferior position in consultation with physicians of other schools. Dignify your profession and the people will respect it.

A PLEA FOR STATE LAWS.

On the account of the recent legislative fight in Mississippi we publish the following from a friend of osteopathy.

DR. R. L. PRICE, JACKSON, MISS.

DEAR SIR:—I see from the papers a bill has been introduced in the legislature of Mississippi proposing the establishment of a Board of Osteopathic examiners to pass upon the qualifications of all persons offering to practice in this state the method of treating diseases known as osteopathy, in which system no drugs are used. This, I learn, has already been done in twenty-four or twenty-five states of this Union.

My information is that Judge J. A. P. Campbell of Jackson, Miss., went to Kirksville, Mo., where the science is taught, and there having examined the workings of that system of healing from all points of view, publicly stated that he regarded osteopathy as the only rational and scientific system of treatment of human disease. This statement coupled with the fact that our Supreme Court has only recently said that the osteopath violated no law in practicing his profession in this state, ought to be sufficient, standing alone, to secure for the bill a fair and impartial consideration.

About three years ago from some mysterious cause or other, I began to lose appetite, flesh and strength, I rapidly fell off from 175 pounds in weight to 116. I was soon so reduced in strength that I would reel like a drunken man in the endeavor to walk across my room, and so changed had I become in appearance that my best friends failed to recognize me on the streets of Jackson. My trouble was called indigestion. Whatever it was, I know that my stomach not only revolted at the simplest kind of nourishment, but a paralysis of some sort had also seized upon my whole system refusing to permit it to act. I was literally dying before the very eyes of family, friends and the citizens, and there seemed no help for me. Such, in brief, was my condition when I presented myself to you for treatment.

I have learned since that you hesitated at first to take my ease because, even though you succeeded in properly adjusting the machine where needed, such was my general anemic and depleted condition you doubted whether there would be sufficient vitality thereafter for Nature to build upon and reassert herself. You did, however, treat me for five months continuously, giving me three treatments a week, after which time you released me, saying that the cause of my malady being now removed, the symptoms would in time disappear and that by observing the ordinary laws of hygiene I would recover health and strength. Following this direction I have increased in weight and vigor daily and am now nearly as strong as I ever was. Not one drop of medicine did you prescribe for me during the whole course of treatment, nor did I take any. Had I listened to relatives and friends however, who, in their anxiety to see me get out of my desperate condition, were daily and hourly entreatting me to “take—this and take—that,” I am satisfied I would not be on top of the ground today.

When I first pulled off my coat and vest, collar and cravat, and threw myself on your operating table, and particularly as your fingers were traveling gently and lovingly up the vertebrae of my back to see,
I suppose, whether any nerve within the machine was being impinged upon I confess that I was not without some misgivings of being "hoodooed." One treatment, however, was sufficient to dispel all such foolish notions. I remember that after the diagnosis I asked you what you called my trouble and you answered, "I don't call it anything, I am not in the naming business. Osteopathy treats causes, not symptoms." The idea of a man calling himself a doctor and refusing to tell a patient the name of his malady was a new one to me, and so abhorrent to my notions of the justness of things in particular and the eternal fitness of things in general I was completely disgusted. I thought I could discover however, after several treatments the reason for this.

Dr. Still, the founder of the system of therapeutics known as osteopathy, after a lifetime of study and observation, had announced publicly in 1874 that health was the result of the free and uninterrupted flow of blood through the arteries and the veins and that disease resulted the very minute an obstruction—the slightest, set in. Of course, that being so, there was no further use for names. And osteopathy itself I soon gathered, consisted chiefly in using the bones of the machine as levers to relieve any obstruction or oppression wherever found, so that the normal flow might proceed as usual and as designed, in the channels marked out for it by the Almighty. Added to this was its wonderful and beneficent function of compelling the flow of whatever fluid may be necessary to those parts of the machine needing it for purposes of irrigation or renovation.

But the ability so to manipulate the machine for the purposes above indicated belongs to the skilled osteopath only. This ability is acquired after thorough education and much practice only. At Kirksville, Mo., under the eye of the great founder himself is a competent corps of professors who have established a regular curriculum of instruction in anatomy, physiology, and other branches of instruction needed by the skilled osteopath only, which curriculum requires, I learn, at least two years of hard study to complete. Does the skilled osteopath then, thus graduated and relieving humanity wherever he may practice his profession, ask too much when he asks protection against the "quack" who should hang out the same sort of sign next door to him? And in granting the protection asked for to the osteopathic operator, would not the people, the beneficiaries of his skill, be more protected than he? And how, let me ask, in the face of the fierce, notorious and unrelenting hostility between the different systems of healing, is he to be protected except by an independent board, and one familiar with the information necessary to tell whether an applicant is a skilled osteopath or an imposter? The premises considered, I confidently look for favorable results for the measure when it comes before the several branches of the legislature for consideration.

What I have here said as to what osteopathy has done and can do is susceptible of proof and demonstration at that, and if the committee having the bill in charge will visit your operating rooms I will be on hand that you may show them what you did for me, and the modus operandi of osteopathic treatment in general. I feel that I owe my life to this system of treatment and will most gladly do what I can and answer such questions as I can to bring this great discovery and the wonderful science built thereon to the attention of the people and to suffering humanity. I think after the committee has seen you operate and heard your explanations, if they do not already agree with David that we are "fearfully and wonderfully made" they will, at least, agree with Dr. Still, that the human engine is the greatest "self adjusting, self-firing, and self-propelling machine" ever constructed.

Very respectfully,

(Signed) ALLEN JENNISON HOOKER

ONE OF TWENTY-ONE PRIVATE ROOMS IN A. S. O. HOSPITAL.
Commencement Week at the American School of Osteopathy.

A class of one hundred and sixty one students received their diplomas after a stirring week of examinations and farewell exercises. The Doctorate sermon, Sunday, June 10th, was preached by Rev. W. C. Templeton, who will be remembered by the graduates of the past four or five years as an old friend. His was a scholarly address and one appreciated greatly by the students and their friends in attendance.

On the Tuesday evening following came the "Class Walk," an observance which we hope will never be discontinued in the American School. When the class in a body visit their professors, sing their class songs, listen to the farewell talks and depart amid cheers and farewells, it leaves in the heart of student and professor a warmer feeling of love for our alma mater. The alma mater of osteopaths and of osteopathy.

Wednesday morning ushered in the exercises so dear to the hearts of the students and so meaningless to the outsiders.

The Class Day exercises in which are reviewed the jokes and frolics the victories and defeats of the past two years. The program was too long for us to review it without leaving out some merited address. Briefly we may mention that we have had no class at the A. S. O. whose members ranked higher in scholarly attainments, and the efforts of its representatives made it a commencement long to be remembered among the faculty and the people at Kirksville.

After his long stay at home the "Old Doctor" came out to the graduation and made two splendid speeches, something much appreciated by the whole class who felt, as have the classes before them, that the commencement would not be complete without hearing from "Pap."

The final program and the presentation of the diplomas was held on Dr. Charlie's big sloping lawn. Half the town turned out. Seats were prepared for three thousand people and a few had to stand. The addresses were masterly. We reproduce the faculty address and that of the class representative. At the close the diplomas were presented and after many farewells all went home with the knowledge that one hundred and sixty more earnest physicians had gone forth into the world to bless mankind by healing the sick.

* * *

Class Roll.

Philip V. Aaronson
Mrs. A. Maud Atherton
Miss Elinor Balfe
Miss Olga C. Beaver
Miss Allie E. Bell
Robert W. Bell
Mrs. Mary Bell
Patrick J. Bergen
Miss Margaret E. Bowen
U. S. Grant Bowersox
Miss Rebecca Brain
Miss Joanna M. Brooks
G. A. Baumgras
L. A. Burnstead

Mrs. Adele Balswell Carroll
Miss Sarah E. Carothers
Robert Grant Cary
Arthur Grant Church
Wm. E. Cadwell
J. L. Caylor
James Ray Clifford
Mrs. Mary W. Clinton
W. H. Clark
Joseph F. Coffman
Benj. L. Cole
Elijah Collier
Mrs. Lillie M. Collier
Mrs. Clara A. Combest
Mrs. Catherine P. Compton
Wilson Gaster Cook
Miss Emma Crossland
Miss Leone Dalton
Lester R. Daniels
Mrs. Edna Cash Daniels
Ralph R. Daniels
H. R. Dalrymple
Wellington C. Davis
Arthur E. Day
Miss Sadie Day
A. H. Dillabough
Rolla J. Dunbar
H. Dorrance
Ella A. Ellis
J. H. Elliott
Julien C. Foster
Miss Martha Foss
Hugh M. Frazier
L. D. Gass
James Ernest Gibbons
Mrs. Julia M. Gladman.
G. A. Gamble
Mrs. Mary Gamble
Mrs. Myrtle Gazda
L. M. Goodrich
Wm. A. Gossman
Miss C. Frantz
Sten Hanson
Mrs. Ida Chambers Hart
Miss Nora Estella Haviland
Gilbert W. Hay
Gudrum Holm
Edward S. House
A. J. Harris
Mrs. Clara Harris
Luther H. Howland
Mrs. Ella Hull
Clyde B. Ingalls
Nelson A. Johnson
Miss Myrtle S. Johnson
Bruce Johnston
Miss Florence Judd
Oliver Curtis Keller
James Kidwell
Edwin R. Larter
Thomas Lord Lorbeer
E. R. Lyda
Geo. T. Leeds, M. D.
F. W. Long
Low Miss
C. A. Lumston
John Lewis Megrew
Mrs. Effie M. Messick
J. D. Miller
J. R. Merkley
E. W. Raymond Morelock
Mrs. Nellie Traxell Morelock
Miss Daisy Ethel Morelock
Mrs. Sadie Frances Morris
Miss Myrtle Morrison
D. N. Morrison
Mrs. Lucy J. Moses
S. O. Mosher
Miss Annie McCaslin
Joseph P. McCormick
Mrs. Mary S. McKay
Mrs. Christena V. McNeal
Miss F. A. McDaniel
A. H. McLaughlin
Jno. M. McRea
Mrs. Rebecca Shuckford Nicholas
Miss Augusta Nichols
Carlton C. Norton
Bernard M. O'Donnell
Albert Olson
Thos. H. O'Neill
Frank A. Parker
Chas. Phelps
Hester T. Philippe
Richard Smith Pickler

Frank Leslie Poland
Frank Preston Pratt
Miss Sylvia Princty
A. M. Reid
Miss Annie M. Roberts
Jesse Howard Robuck
Alfred W. Rogers
Mrs. Effie L. Rogers
Frank E. Root
Miss Elizabeth Rouze
Hugh L. Russell
Mrs. Sarah E. Russell
C. T. Samuels
Jeptha Dudley Scobee
J. H. B. Scott
Miss Maie La Salle Sebben
Miss Mary M. Shepherd
Miss Carolin Sheldon
Vane Burdette Sigler
Mrs. Bel C. Simkins
Miss Georgia Smith
Thomas H. Spence
Mrs. Alice M. Spence
Charles Sperry
Miss Theodora M. Spring-Rice
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Fred N. Steen
Walter Stewart
Miss Charlotte Strum
Wilfrid Streeter
Miss Iva Mae Still
Alfred T. Sullivan
John M. Treble
Miss Edna Thayer
Miss Ethel Kent Traver
Miss Bertha Turk
Miss Ella B. Veasie
S. E. Warner
Miss Sarah C. Wardell
Merle Reed Wallace
Mrs. Oliver Calver Waller
Miss Besse Belle Walling
Miss Mary Walters
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Henry Allen Whitfield
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The Journal of Osteopathy
Published Monthly
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R. E. Hamilton, D. O., Editor.

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Dr. R. E. Hamilton.
The editor of the Journal, who wants to meet all his friends and make new acquaintances at Put-In-Bay. ** * Come and See Us.

When going to and coming from Put-In-Bay, get a stop over and visit in Kirksville. Renew your acquaintance at your alma mater and visit the new hospital. The Journal has taken up the stop over question with the Burlington, the Wabash and the Santa Fe and the prospects of success are good. ** * One Hundred Dollars Not Enough.

In a recent letter from San Francisco Dr. Ivie, chairman of the distributing committee, says that many of the San Francisco osteopaths are sorely in need of assistance that thus far the contributions to the A. O. A. relief fund have amounted to but little over one hundred dollars, and much more is needed. Nearly all the osteopaths lost not only their practice but their personal effects and professional libraries.

The one hundred dollars sent from the A. S. O. was unfortunately sent to the general relief fund before the osteopathic relief committee was organized.

Help is more needed than ever. Send your contributions to Dr. Horace Ivie, 3658 Sacramento St., San Francisco.

** * In the list of officers of the M. O. A. printed in last month's Journal it should have been Dr. Bertha A. Buddeke, secretary, and Dr. Minnie Potter, editor.

Massachusetts College Graduation.

We are in receipt of an invitation and program of the graduating exercises of the Massachusetts College of Osteopathy. Graduating address by Dr. Charles McCurdy, Dean of the Philadelphia College of Osteopathy.

There were sixteen graduates.

** * Our National Convention.

Some More Facts About Put-In-Bay.

Those of our profession who are contemplating a summer vacation or a few days of loyal work at the great annual convention of the American Osteopathic Association, are now casting their mind's eye thoughtfully towards Put-In-Bay Island, the great summer resort where the meeting is to be held.

The convention has certainly been well advertised. Since it is to be held in a summer hotel which makes a business of entertaining conventions, the many attractions of the place have become fa-
miliar to the profession: but there are other things which many will consider when making up their minds to go or to stay at home. Naturally we all want to know the "cost and come to." Many and grave doubts were expressed at the convention last year about the advisability of holding the convention in a place so "isolated." The older members had not forgotten the experience with the hotel at Cleveland and feared a repetition of the same.

Hotel Victory has furnished an ironclad contract and there need be little fear that the rates will be raised. Put-In-Bay is a small town built by summer residents. Besides Hotel Victory there are a number of smaller hotels, among them are Put-In-Bay House, Park Hotel, Beebe House, Hotel Oelschlager, The Detroit Hotel Perry, the Oak Point Hotel, and a number of smaller ones all on the American plan with rates from $1.50 up. Almost anything you want is to be found on the island, and judging by the list of names of the business houses liquid refreshment is especially abundant.

The island is easily reached by steamer from Sandusky, Toledo, Detroit, Cleveland and Buffalo. The number of holiday trips possible from this place is excellence only by Denver where our last meeting was held.

Both pleasure and profit will be found in his trip. Our advice is go. The editor expects to meet you at Put-In-Bay.

A Correction.

We are in receipt of Number one of volume one of the "Still" College Journal of Osteopathy. In wishing this Journal success we would suggest that in copying an article without comment, from the Des Moines Register and Leader, they leave a decided impression that Dr. R. L. Stevens, a new instructor in their college, was an instructor in the American School of Osteopathy. Dr. Stevens graduated two weeks ago, June 14th at the A. S. O., and has never been connected with that school in any capacity except as a student.

We feel sure that this kind of publicity did not have the sanction of Dr. Stevens and hope that it was an accident on the part of the Still College Journal. We would hate to see the new Journal launch forth into the "flap doodle" sort of advertising which has so often disgraced the profession.

Visitors at the A. S. O.

Among those who visited in Kirksville, last week, we noticed Dr. C. E. Boxx of Plattsburg, Mo., Dr. W. J. Deeming, of Brookfield, Mo., Dr. F. C. Lincoln, of Buffalo, N. Y., Dr. W. E. Scott, of Spartansburg, S. C., Dr. W. J. E. Dillabaugh, of New York City.

Vibrator Knocking.

For several years the manufacturers of vibrators have been knocking at the door of osteopathy. Now, one of the biggest is doing a little knocking of a different sort. In "Mechanical Vibratory Stimulation" for May, we find the following under the heading of Sciences:

"..... The osteopathic treatment is also a nerve stretching procedure being accomplished in various ways by manual force. This treatment fails for the same reason that neurectomy fails; these cases need something more than nerve stretching." Then follows a description of the vibratory (?) method of treating this disease.

An Anniversary of Osteopathy.

June 22nd, 1874, was a memorable day for osteopathy, one that will go down through the centuries of the world's history as marking an epoch of reformation in the world of healing.

On Friday evening, June 22, 1906, this event was celebrated at the American School in a manner exceedingly delightful to all who had the good fortune to attend. At the designated time, 8 o'clock, a large audience had assembled in Memorial Hall to greet the founder of this great science and to cheer and encourage him by properly commemorating the anniversary so dear to his heart.

Dr. A. T. Still, familiarly known as "The Old Doctor," being introduced, proceeded to give to his appreciative listeners one of the best addresses of his life. He was feeling unusually well, and under the inspiration of the occasion looked fully ten years younger.

The large audience was held spell-bound for over an hour by the eloquent and earnest words of the speaker.

He related in most graphic terms the history of his experiences; how his practice of the old methods of healing, their failures to produce the desired result and the pernicious effects upon the body organism of poisonous and useless drugs, had led him to a research into the then hidden mysteries of therapeutics. He said that on this day thirty-two years ago he, in the light of reason, and his investigation of truth, took upon himself a life-time obligation to uphold the principles he had found to be the immutable truths he discovered to be underlying all cause and cure of disease.

He referred in beautiful language to the perfection of God's creation of man wherein he was pronounced not only good but "very good" as a demonstration of his handiwork; hence since man was a perfect machine, controlled and operated under direction of laws the disturbance of such mechanism must be adjusted and regulated by laws under which it acts. He was courteous in dealing with medical practitioners but spoke in no uncertain terms in denouncing the use of drugs as remedial agencies, and the utter failure of such as specifics in the treatment of disease.

He urged the necessity of sticking tenaciously to osteopathic principles and therapeutics, and scathingly condemned any tendency of graduates to drift off into medical schools.

He raised the banner of osteopathy high above any other, and bade it float in the upper air of reason, truth, and justice.
His was not an address of fancy and speculation, but one full of logic philosophy, and sound reason.

It was as it were the crystallization into one gem of diction the speeches of a lifetime, that it might shine in brilliancy and beauty.

Every student and practitioner of the science should have heard him for by this means alone could the full import of his words of wisdom, and the inspiration of his thoughts be obtained.

In concluding, he expressed a desire to have the day commemorated, at least as long as he should live. With a "long live the Old Doctor" and amid enthusiastic applause, the great crowd moved out of the hall, each one feeling that it was good to have been there.

* * *

Missouri State Board Examination.

Dr. C. E. Boxx, secretary of the state board of examiners, came to Kirksville during the A. S. O. commencement and conducted an examination for those wishing to practice in Missouri. Seventy-three took the examination. The questions might be hard for practitioners out of school for a number of years, but it was a fair straight examination and the members of the graduating class of the A. S. O. fresh from their school work, had little difficulty with it. All passed. In his reply to the editor's letter regarding the examination Dr. Boxx congratulated the A. S. O. on the splendid showing of its students in the examination.

* * *

Dr. C. E. Boxx.

was his first and he seemed to enjoy it hugely. Being invited by our local fishing club to try his hand at catching black bass, he accepted and now he tells of the eight pounder which he almost caught.

Dr. Boxx is a good fellow and made many friends in Kirksville.

We understand that he has recently been elected mayor of his home town, Plattsburg.

Missouri State Board Examination.

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* * *

New Catalogue and Souvenir.

The American School of Osteopathy has just issued its annual catalog. It contains eighty pages of printing and is pronounced the best example of catalog work yet shown the profession. There is now in press a forty page Pictorial Souvenir supplement to the catalog. Both books are printed by the Journal Printing Company who have printed more osteopathic books and other osteopathic literature than all other printing concerns combined.

To the Profession:

I am sure the profession does not appreciate the fact that in changing from the two to three years course there will be a time of more than a year when there will be no senior class in school. The next class will graduate February '07, that being the last two years graduation. Then it will be June '08 before the next commencement exercises; hence the time between will be the best for any who may be thinking of taking up post-graduate work, as there will be an unlimited amount of clinic, and the ones that are taking advantages of the post-graduate course at this time will have advantages offered that will never be possible to offer again, hence we are in hopes that we may have a large class to take care of the clinic patients, as we would have very much to have a falling off in that department, as it has taken a long time to build it up to where it is at the present time. We also appreciate the fact that when the graduates who have taken the two years course were students they did not have enough time to make themselves perfectly familiar with the subjects, as the curriculum was one that made the average student work very hard; so this arranged as we intend arranging it will afford better opportunities.

It is the intention to make a strictly post-graduate course, but we are also going to allow the student to do elective work, and as the P. G. certificate is not the one that is registered and helps the student to locate, there will be no examinations on that work, it will be largely lectures, and that being the case there can be more ground covered.

The school in starting this work labor under a disadvantage in having at that time in school six separate classes, and of course the first attempt was not what we intend to make the future.

We also have in connection with the study course, the hospital which will afford hospital clinic, and the post-graduates will be the ones selected to do a certain amount of interne work, and there will be a special hospital drill for them. We know this feature alone will be worth a great deal to the practitioners, and especially since they have been in practice for a few years.

In the beginning it was the intention to fit the osteopath for chronic work, but now since the supply is greater and the field of acute practice is being entered, the osteopath must be both physician and surgeon in the families which he may be called "Family Doctor."

We are also going to put special stress on obstetrical work, as we appreciate the fact that in order to fill the place as a family physician, obstetrical work will be necessary.

The obstetrical and surgical amphitheatre is a feature of the institution. It is light and the very best chance for seeing the work is given the student. The hospital was formally opened the 29th of May, and before two weeks had passed every room was filled, so one can readily see that it is going to be a success from the experience standpoint.

We are also adding a surgical laboratory, in which all classes of fracture and operations are taught. The student will be required to do operations of a minor nature on a cadaver. This will also be well worthy of consideration.

We would like to hear from all that are thinking of taking up this work, so we will know what to count on. It is in osteopathy as in other professions, a survival of the fittest and the man or woman that finds time to break away from his or her work and go to college for some work in special lines. They are the ones who in all cases are leaders in their respective professions.

We know that many say it costs a great...
Etiology of Cerebro-spinal Meningitis.

At the last meeting of the American Osteopathic association at Denver some very pregnant ideas on meningitis were presented. Dr. C. B. Atzen of Omaha, Nebr., stated that, “The diplococcus intracellularis is not in itself sufficient from our standpoint to account for the inoculation, even if we grant that an inoculation has taken place, for the predisposition on the part of the patient is not explained by the acceptance of the germ as the cause, as there must have been a reduction of vitality on the part of the tissues involving an etiological factor prior to the inoculation and as I understand it this primary etiological factor must be found and demonstrated before we can give rational treatment.”

Our contentions in this matter receive strong support from the report of a commission which under the auspices of the German Government had investigated an epidemic of meningitis in one of the provinces. The report states among other very valuable things that twenty-nine autopsies on patients dead of this disease were carefully made, twenty-two were children under ten years of age and seven were adults. The report shows that the infection started in the pharyngeal tonsil, entered the cranium through the sphenoid bone, traveling along the vessels which run from the pharynx into the sella turcica through the sphenoidal foramina. The part of the brain first infected was the pituitary body. There was no evidence in these twenty-nine autopsies of the infection passing through the cribiform plate of the ethmoid and the infection seemed to travel by lymph channels rather than by blood vessels. The bacteriologic studies in these investigations show that the meningococcus was not necessarily the only germ to produce the disease and the investigators state that, “The real cause seems to be as unknown as that of scarlet fever.”

We see from this that meningitis, like pneumonia, is not a communicable disease and that the most frequent predisposing causes are apt to be lesions of the atlas, axis, of the lower cervicals, upper dorsals, hyoid bone and also all lesions in other areas of the spine producing a debilitated state of the system. — C. H. H.
THE JOURNAL OF OSTEOPATHY.

THE PROGRAM OF THE PUT-IN-HAT MEETING, AUGUST 6th to 11th.

MONDAY, AUGUST 6th.

Reports of Committees—Publication Committee, Educational Committee, Legislative Committee.

Treasurer's Report.

Trustee's Report.

Routine Business.

8:00 p.m.—Reception.

TUESDAY, AUGUST 7th.

Symposium of Practical Treatment:

(a) Cervical Region—Dr. G. A. Wheeler, Boston, Mass.

(b) Dorsal Region—Dr. W. W. Steele, Buffalo, N. Y.

(c) Lumbar Region—Dr. Josephine DeFrance, St. Louis, Mo.

(d) The Pelvis—Sacrum, Coccyx, Innominata—Dr. Vernon W. Peck, Pittsburgh, Pa.

(e) Ribs and Vertebrae Correlated—Dr. George J. Helmer, New York, N. Y.

(General Discussion.)

Business.

8:00 p.m.—President's Address.

WEDNESDAY, AUGUST 8th.

Practical Dietetics—Dr. H. H. Moeller, Minneapolis, Minn.

Osteopathic Applied Anatomy—Dr. M. E. Clark, Kirkville, Mo.

Osteopathy as a Profession—Dr. J. H. Sullivan, Chicago, Ill.

How Osteopathic Lesions Affect Eye Tissues—Dr. Louisa Burns, Los Angeles, Calif.

(General Discussion.)

Business.

8:00 p.m.—Alumni and class reunions.

THURSDAY, AUGUST 9th.

Pediatries.

(a) Infant Nursing—Dr. Alice Patterson Shibley, Washington, D. C.

(b) Osteopathic Treatment of Infant Disorders—Dr. Louise P. Crow, Milwaukee Wis.

PAPERS.


2. Iritis—Etiology, Pathology and Treatment—Dr. O. J. Snyder, Philadelphia, Pa.

3. The Treatment of Eczema—Dr. Morris Lyncheahen, Chicago, Ill.

4. What Osteopathy Has Done With Tumors—Dr. Clara Wernicke, Cincinnati, Ohio.

5. A Few Cases of Mental Diseases—Dr. L. A. Liffring, Toledo, O.

6. The Menopause—Dr. D. Ella McNicol, Franklin, Ind.

7. Pronounced Insomnia—Dr. R. W. Bowlmg, Des Moines, Ia.


9. The Osteopathic Treatment of Constipation—Dr. M. C. Hardin, Atlanta, Ga.

(e) Prophylactic Treatment of Children—Dr. Louise A. Griffin, Hartford, Conn.

(General Discussion.)

Emergencies.

(a) Hemorrhages (lungs and uterus)—Dr. E. C. Fickler, Minneapolis, Minn.

(b) Unconsciousness or Insensibility—Dr. Edgar D. Hoist, East Berlin, Ont., Canada.

(c) Fits or Seizures—Dr. A. B. King, St. Louis, Mo.

(General Discussion.)

Osteopathic Lesions in Acute Respiratory Diseases—Dr. C. M. Turner Hulett, Cleveland, Ohio.

Prize Essay Announcement.

8:00 p.m.—Alumni and class reunions.

Dr. Edgar D. Hoist, East Berlin, Ont., Canada.

Dr. A. B. King, St. Louis, Mo.

(General Discussion.)

Practical Talk: "When Is a Surgical Operation Advisable?"—Dr. Francis A. Cave, Boston, Mass.

Business: Election of Officers, fixing next meeting place, installation, adjournment.

We are glad to see the journal of our national association giving attention to

topical matters and we heartily endorse all that Dr. Willard has written. It is our aim to make the Osteopathic Journal the ideal magazine for the lay reader—full of earnest honest articles by the best men in the profession; yet not too technical for the average reader.

From a purely business standpoint our popular magazines deserve the support of every practicing osteopath.

The Osteopathic Journal

MARCH, 1909

CONTENTS

The Osteopathic Journal, Kirkville, Mo.

Still National Osteopathic Museum, Kirkville, MO
Evidently tried to injure has as to do so. The law was passed in 1901, and it was a question for the state board to decide, for the law clearly gave that into their hands by these words, "the applicant for certificates must be a graduate of a legally incorporated college of osteopathy, recognized by the Board of Examiners."

Your "correspondent" says: "The law does not give them (the board) the power to change the time required by the different schools" and in answer to that I will quote the court in discussing this same question in a former case, as follows:

"Evidently the standard of proficiency in scholarship as a preparation, and the particular studies necessary to secure a fair preparation, must change as the discoveries in natural science open new fields of investigation and suggest or reveal new curative agencies. The legislature cannot successfully prescribe in advance a standard to meet these new and changing conditions.

The method adopted appears to be sufficiently definite to enable all colleges to reach the required standard when in good faith they desire to do so. The law is as fixed, definite and certain in this respect, as the nature of the subject and the object to be attained will permit, and we do not think it should be held void because it adopts the standard fixed from time to time by those who, it will be presumed, are the most eminent in the profession which it attempts to regulate, and who should be the most interested in maintaining the highest degree of professional proficiency, skill and training."

Therefore, it was only after due consideration and deliberation, in the interests of the whole osteopathic profession, that the board decided to require a three years' course of study, as the only way to raise the standard; entrance by examination was provided by law for the first year only. The action requiring a three years' course was passed by the board in April, 1903, to take effect in 1905, thus giving ample time for students who wished to locate in California to so prepare themselves.

The action has the support of the State Osteopathic Association, and of different lawyers representing the best legal opinion of the state. In one of these opinions the board is given the following assurance: "Your Board undoubtedly has a right to prescribe that you will not recognize any college that does not have a three years course, and will not hereafter issue a license, to any person who has not taken a three years course."

Your correspondent also states that "if the board has the right to compel a three years course, they have the power to compel a ten years course." Such a statement as that hardly deserves an answer, for it is foolish, because the board must and have acted reasonably, having adopted what other states have required, and what the colleges and the A. O. A. planned for, viz., a three years, not a ten years course.

There is not the slightest ground for truth in the statement that it is "Class legislation" for applicants of all schools are required to present equal qualifications two year graduates of both the colleges in California are required to take a post-graduate course, the same as graduates from other schools, and if the applicant has the advancement and good of osteopathy at heart, he will not find it such a hardship, for there is no practitioner who will not be benefited by such a course, and we desire to encourage the best in this State.

Yours fraternally,

J. S. WHITE, D. O., Sec.

**State Board Examination.**

Part of the questions used in the Missouri State Board examination held in Kirksville June 11 to 14 inclusive:

**ANATOMY.**

1. Describe the vagus nerve, giving origin, distribution and function.
2. Describe the femur bone.
3. Name muscles attaching to the scapula.
4. What structures pass through the diaphragm?
5. Locate and describe the thyroid gland.
6. Describe the celiac nerve, plexus and name three secondary plexuses arising from it.
7. Give origin, function and distribution of the 5th and 7th cranial nerves.
8. Describe the sternum bone and manner of articulation with the ribs.
9. Give drainage of the spinal cord.
10. Give anatomy of the sympathetic nervous system.

OSTEOPATHIC THEORY AND PRACTICE.
1. Give an osteopathic definition of osteopathy.
2. How could a twisted 10th rib cause renal hemorrhage?
4. How would you treat a case of diphtheria?
5. Describe a case of typhoid fever and give treatment.
6. Is the prescribing of pre-digested food in harmony with osteopathic theory? Why?
7. What is St. Vitus' dance. What pathologic changes take place in the spinal cord and what lesions are found?
9. What causes rheumatism and what organs are especially involved?
1. Describe the lithotomy position.
2. What centers would you treat to stimulate labor pains?
3. Where and how would you treat to bring about a relaxation of the uterus in labor?
4. What are the indications for the induction of premature labor?
5. What is the difference between abortion and premature labor?
6. How would you prevent the completion of premature labor
7. How would you control excessive hemorrhage attending abortion?
8. Give technique of procedure after child is born and before placenta is expelled.
9. Give three characteristic signs of pregnancy before the fourth month.
10. Describe three malpresentations of fetus at time of labor.

URINALYSIS.
1. Describe normal urine, giving (a) color; (b) odor; (c) reaction and (d) specific gravity.
2. What is specific gravity, and how do you determine the specific gravity of urine.
3. Name four constituents of normal urine.
4. How would you determine the presence of blood in the urine? Give test.
5. Describe the urine of Bright's disease, giving elements found in abnormal quantities, specific gravity and tests used.
6. Describe diabetic urine, giving (a) color; (b) odor; (c) reaction; (d) specific gravity; (e) amount passed in 24 hours; (f) elements found in excess and (g) tests used.
7. Give test for uric acid.
8. Give tests for the following inorganic salts of the urine: chlorides; alkaline phosphates; sulphates.
9. How would you distinguish pus from mucus in the urine?
10. Describe uric acid crystals.

PHYSIOLOGY.
1. Name the functions of the kidney.
2. Describe respiration and give cause.
3. Describe normal heart sounds.
4. Define and give example of voluntary and involuntary action.
5. Name the functions and constituents of normal blood.
6. Define anabolism; katabolism and metabolism.
7. Define a gland and give an example of internal and external secretion.
8. What is the glycogenic theory?
9. Describe the motions of the stomach and what fluids each acts upon.
10. Name the enzymes of the stomach.

The A. O. A. Meeting.
The next meeting of the American Osteopathic Association will be held at the famous summer resort, Put-in-Bay, Ohio, August 6-10 inclusive. The railroads have made a rate for the round trip of one and one-third of regular fare. Hotel Victory, where our meetings will be held, is one of the largest hotels in the world.

Still National Osteopathic Museum, Kirksville, MO
to take a course where theory and practice go hand-in-hand.

The hospital is complete in every detail. It contains a large surgical amphitheatre where students witness all kinds of surgical operations, and a clinical amphitheatre below, where hospital cases are studied. It is the plan in the future to run continuous clinics in gynecology, surgery and nervous diseases each afternoon. The arrangement of the building makes it perfectly possible to do this, and there is plenty of clinical material. There have been about twenty-five operations at the hospital, during the past two weeks, many of them were major operations. Several congenital dislocations of the hip have been operated upon this term. This, in addition to the minor surgical cases, enables the student to get a pretty good idea of surgical technique and to observe the osteopathic handling of such cases, which is all important to osteopaths. The student has the privilege of treating patients in the hospital, under the supervision of the physician in charge. The fact that the hospital is near the school building is a great improvement over the condition in most large cities, where the student necessarily spends much time going to and from the hospital.

The obstetrical cases have proved the value of osteopathic practice in this line of work. These cases are delivered in the surgical amphitheatre before the senior class by men who have made a specialty of this branch, and it is now possible for the A. S. O. students to see more cases than is required at the best medical schools. There are between eighty and one hundred cases each school year and students are present on every occasion. Dr. Charley Still has a record of nearly a thousand cases. Dr. Clark reports between five and six hundred more, therefore they are better qualified than anyone else in the profession to teach obstetrics. One difficult case handled osteopathically is worth more to us than several delivered by one who does not understand the underlying principles of osteopathic obstetrics.

The daily clinics, under Dr. Laughlin, offer the student an exceptional privilege. It is seldom that a student has a chance to study so many rare nervous cases as we do here in Kirksville. Patients come from all parts of the country, are brought before the classes, case diagnosed, treatment outlined, and carried out by students or faculty and progress watched day by day. Thus we have a chance to learn what can be done osteopathically. All of these advantages, together with the didactic work, makes a very strong and satisfactory course. The departments are presided over by men of unquestioned ability who devote their whole time to the work and are always ready to help the students in every possible way. All twenty months graduates who have not had the privilege of a course in Kirksville, should avail themselves of the seven months post-graduate course.

I do not mean to say that all that is good in osteopathy is in Kirksville. There are some schools that are trying to teach straight osteopathy. We need them, but some claim that it is impossible to get the best in a small town like Kirksville. To my mind it is the best thing that ever happened to osteopathy that the parent school began its career in a small place. If the school were in a large city, the faculty and students would meet only for class work and the distraction of city life would divert the minds of the student from osteopathy. Here one eats, drinks and dreams osteopathy. It is in the atmosphere and students gain much by unconscious absorption. It is a valuable asset for an osteopath to have associated with those who have made osteopathy possible and those of us who embrace the opportunity may well rejoice in having known the ‘Old Doctor’ and the men closely connected with him. Personal contact with them enables one to acquire that part of osteopathy which does not and cannot creep into the text-books, the folk-lore of osteopathy.

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Still National Osteopathic Museum, Kirksville, MO