INDEPENDENCE

AMERICA as a nation has said that in the course of human events it became necessary to separate herself from other countries, customs, and governments, declare her independence and live accordingly. She lived and labored to put that thought into form and execution, though it cost much money, time and life to obtain that independence. For one hundred years we the posterity of our forefathers have enjoyed the blessings bequeathed to us by them. Today we are a powerful nation; wealthy in our great and fertile fields, and in our colleges of law, literature and skill. Once we were despised. Today we are respected, first for our intelligence, next our wealth and lastly as the defending champions of the seas; not the tyrants but the true friends to all that are manly. We have two methods only of commanding respect of monarchies and despots. "Liberty and equality to all mankind." If that does not call forth the respect of the world our fleets of both land and sea speak in such tones that monarchs say by both word and deed, that America has the men, intelligence and the skill to demand and obtain respect for its flag and country.

With Osteopathy the same condition is now before us. We have felt that we as a scientific branch of the healing art have discovered useful truths, that the world needs, wants and should have. But the "Czars" of medicine have said, you must die and be wiped from the face of the earth. Legislatures have been sought and asked to assist in putting to death the schools of Osteopathy, with more or less success crowning such efforts. They have said that the world should not choose for itself the kinds of help in sickness that he or she thought best suited to his condition.

If Osteopathy has scientific merit and carries no bottles of poison that would produce death and destruction of human life why should medical schools ask prohibitory legislation? Why not let the people choose from all schools of healing arts?

At this point let us enter a protest against prohibitory opposition, de-
clare our independence, raise our flag and give to the world literature of our own production. Have we to be led to the altar condemned by their rules of symptomatology, which is only a poor system of guess work, and be drenched by the poisonous compounds of their schools of pharmacy? Are we to be prohibited by such schools from studying and applying the healing art as we find written in the book of nature? Does an American have to say "my lord" may I think a little? Or will he say as he has said for one hundred years just passed, that all men are free and equal. I will think, I will write, I will speak, though the smoke of roaring cannons of opposition should accumulate around me so densely that it could be cut with a knife.

We object to your literature being used as discipline; we claim the prerogative to abridge, substitute, amend, or reject all books from any medical school, or literary department, until Osteopathy shall have formulated such books and literature as its progressive demands have called for in thunder tones, and has never been answered outside of chemistry and anatomy. From now on be it known that we have graduates from the American School of Osteopathy who have never had a taint of the old system of drugs to bias their judgments by preconceived prejudice, or veil their eyes from the enjoyment of the beauties and healing art of nature. Their pens are abundantly able to furnish the needed literature.

CAUSE.

Each person to get good results and improve from day to day must hunt for cause, then operate with a view to change the cause that has produced such condition, by change of currents of blood to nourish and wash away such accumulated bulks, by correcting bones and giving easy discharge to venous blood, that it may absorb and carry off deposits from joints, muscles and membranes. A goitre is only what blood has failed to be used by the nutrient nerves. Conditions not symptoms are what an Osteopath has to contend with. When he goes to a patient he asks for knowledge of conditions; he starts in with pictures of a body in healthy condition in his mind, and searches for variations from that standard. Thus an arm on one side when compared with the other arm must be the same in size, strength, motion and temperature, with the same color. A cold arm, blue in color and much larger than the other arm would present a condition that would be unnatural in form, motion, blood and venous action. Thus we see and feel a condition that is grave in its effect on health and motion. We must reason for cause, why this blood did stop and swell a part, and why it does not go on and reduce such swelling to its original size. At this time reason would take the exploring eye and searching hand to the bone structure, feel, look and compare all joints, in search of slips or variations from centers of actions; also search closely for impacted, twisted or overlapped and crossed muscles or ligaments, that would press on or across a nerve, vein or artery, and stop their normal work.

The Osteopath has the condition before him all the time; also all symptoms, but the cause is the mystery that has produced the condition, and when found he will find a mechanical cause for all the trouble he is likely to meet. Would we be safe in saying all diseases of climate and seasons with contagions are the results of local causes? When we meet fever have we not found a condition with cause in fermentation of fluids, of lymphatics of the whole system and those of the superficial fascia more than the deep seated, because of contact with atmospheric air? Then as we know the condition why not enter the combat at once, and remove cause of suspension, and labor for restoration of normal action? First by arteries, next the veins, then the excretory system.

The Osteopath's acquaintance with the nerve and blood supply, their local and general uses are sufficient guides if wisely conducted with that attentive perseverance that is due in treating diseases, which is nothing more nor less than the conditions produced by confused and perverted nutrition and renovation. Thus symptoms banish in quick succession from distress to recovery. We would admonish the operator to give attention to conditions, this is all important to his success. His eye and hand are very trustworthy as his microscope and thermometer, and more so and more useful in the sick room than all artificial appliances. Nature has provided and armed us with all that is necessary to explore for and locate cause, and successfully treat all diseases of climate or any season of the year. I have spoken thus freely to draw the student's and practitioner's mind to more attention to conditions, and treat accordingly; and less attention to our customary routine of name hunting before treating according to the rules laid down in authors on symptomatology.

A condition not normal is found in all diseased persons. That condition may have many symptoms common to other diseases, which would require much care and long acquaintance with books and observation to classify the name properly the disease according to the rules of popular symptomatology, which often fails to know smallpox from chickenpox, measles, scarlet fever and on through the many thousands of blunders made in giving names and treating according to such rules. Thus the importance of an operator dealing with conditions when he would wish to know the cause, and treat by the more safe rules of reason. A limb, organ or division of the body cannot show an abnormal condition without the producing cause being close by. The same law is just as true of pneumonia, flux, typhoid and other fevers; you find the patient in a condition and you have been called to get him out of such condition, your duty is to find the cause of the bad condition, seek and know where the cut off is and what will relieve that person: You are not any wiser to know the
Latin, Greek or Choctaw names for such and such diseases, unless you are a pill doctor. Symptomatology leads you straight to a drug store. Conditions, point you to cause hunting and finding, and just what to do to relieve the sufferer in the hour of need. Let the subject of conditions be your universal starting point and not hunting names. We should honor symptomatology because it is a relic of the visions of the stupidity of the kinds of literature that legislatures are called on to protect from deadly shots of bitter truths, that have come to stay and abolish unsound theories from the earth.

GOOD ENOUGH.

WHEN a pen is taken in the hand of a writer for the purpose of giving the readers of the Journal of Osteopathy something to read and study on, after it has been read, I will suggest that the writer confine himself to write what he knows or what he thinks he knows. His opinion is what we want, his observations are good enough. It is the writer’s opinion written in the American style, and words from the American language. Why not use the American language? It surely can tell anything an American wants to say. An American should be proud of our institutions of learning and our dictionaries. “He should be boldly proud of our liberty of speech, press and pen. Then why should an American hunt up what old authors have said, and offer such quotations and piles of paper and book stories as his article? If I should give my opinion on some subject by telling in a nice scholarly manner what Edison, Franklin, Lincoln and a thousand other witnesses have said, what court would listen to such testimony? Any judge would laugh and say, Mr. Wart please tell what you know in this case, if you know anything, if not please retire. It is what you know that the court wants of you, not what John Doe never did know. It is easy for anyone to write on the subject of Osteopathy, and give us something to read that is new and fresh from the writer’s pen. I want to kindly open the pages of the Journal for original productions, minus quotations, from old books of however. You and your word are good enough for me; give us your own, long or short, and to the point in about one or two thousand words, or less if you can tell all in such limits. But few persons will read ten, fourteen and twenty pages in the Journal on any subject. It is brevity wisely used that we like.
broader, in the sense that they have been applied numerically to a greater number of cases, but this in no way alters their original conception, nor does it make their application more specific; regarding this latter claim we might add that the treatment has become rather less specific among a certain class of practitioners than otherwise, and it is only necessary to refer to the writings of the older and more experienced men in the profession, to obtain ample evidence that their methods of treating are more specific in many instances than are the methods now in vogue.

Dr. Still devised his "suspension apparatus" with no other object in view than to force specificity in treating, to give a so-called general treatment while using this apparatus, if not impossible, it is to say the least, most awkward.

As to the science "becoming more difficult to name," are we to understand from this, that as the conception of the name becomes more and more intimately related to the practice, we must consider the advisability of selecting a more appropriate name? "More difficult to name," the vacuity of this statement should debar it from being accorded the usual courtesy extended an argument.

Inane on the face of it, it requires no argument. It is an utter impossibility, essentially impracticable for us to even entertain the idea, of renaming the science of osteopathy, even if we could conceive of any justification for giving this matter a passing thought, which we cannot.

"What sense" then for such statements as are given in the above quotation?

Is it not about time to cease apologizing either for the name or the naming? It is the clinical experience of every osteopathic practitioner, that in the majority of cases, the pathological condition can be traced to a disturbed relation of the osseous structure, and that the majority of cases are either relieved or cured by re-establishing the normal relation of the parts of the osseous structure. This is a fundamental principle of osteopathy. What sense, what logical basis, then for referring to the name, as a misnomer? The fundamental principles are reasonably defined by it, in this case are accurately defined by the derivation of the term. A single word cannot explicitly define nor fully explain the science.

The name stands for the precepts which go to make up the science, stands for the completed work, that is, it stands for the whole and parts of the whole system.

In conclusion I wish to call attention to this point, if in this so-called "broadening" process, some of the practitioners in their practice, or if instructors in the colleges, avail themselves of accessory methods, that we know have been used previous to the propounding, as well as prior to the clinical demonstration of osteopathic principles that for such appropriated, plagiarized, unwelcome additions to osteopathy, the principles that go to make up the science cannot, must not, be held responsible. The acorn can no more bring forth the poplar, than can superficial study, prejudice, doubts, false reasoning, bring forth the pure mind that characterizes the earnest, true-blue osteopath, and by osteopath I mean osteopath, not those adulterations, those birds of prey, that use, advise or teach the methods of osteopathy, massage, drugs, gargles, steam inhalations, electricity and "what not." These are not osteopaths, but men who have remained in some osteopathic school just long enough to acquire the technique of a few mechanical manipulations, who work by rote, who treat symptoms no matter as to cause. These men are the little excrescences on the body of Osteopathy; they appear and disappear, but remain long enough to arouse local in inflammation.

It is such as these who doubt the originality of osteopathy, who vainly endeavor to demonstrate the priority of other systems, who refer to the name as a misnomer, who fail to differentiate the methods, the philosophy from other systems of healing, who have failed to grasp those fundamental basic ideas which govern osteopathic procedure, who have failed absolutely to grasp the meaning as well as the application of the original conceptions of osteopathy.

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CONSTITUTION

Paper by Dr. Joseph H. Sullivan, read before Chicago Osteopathic Club—February 20, 1906.

THE subject Constipation, without doubt, causes us all more perplexity, makes us think harder, than any subject or condition with which we meet.

I think all will agree with me when I say, that the Osteopath confronted with a case of constipation must realize the vastness of the field in which he has to work, boundless almost are its expanses, bewildering the network of nerves controlling the area involved in a typical case.

This at least is my state of mind when for example a patient says to me, "Doctor, mine is a case ten years' standing, I have no action except by an enema, or laxative; I, however, have an action when I ride on a train," showing that the functional control is re-established simply by change of scene, while the condition savors of an organic character when at home, hence my perplexity.

Truly we may locate lesions at, say the fifth dorsal, or the sixth or seventh, or the whole spinal chain may be involved apparently, from the fourth dorsal to the second lumbar, or the coccyx, but even after these have been corrected I have had cases who still persisted in their disordered state, though I will admit that there are very few but respond in some degree to our re-establishment of vasomotor control of the area involved through spinal adjustment Osteopathically, but occasionally a case is met with
which resists our utmost effort in their behalf; this then is the case we should give our consideration to-day. A chain is only as strong as its weakest link so we should and I am sure we will in time strengthen our Osteopathic chain in constipation. I believe the time will come when we will be masters of the function of peristalsis in the average adult.

Not long ago I discharged as cured a case, a young woman whom I had treated for fifteen months for constipation. She had never had a natural action of her bowels during her life of twenty odd years. She had a posterior ninth dorsal, which I corrected entirely in three months, resulting in slight improvement as to peristalsis and vigor in the intestines, and an enema sufficed where before it did not; there was some local disorder but this was easily remedied and had no apparent bearing on the other condition. After fully ten months’ treatment I finally confined my work to the cervical region and once in about ten days stimulated the sympathetic, p.s. rectum, up as far as I was able with the forefinger. Finally I was gratified at having things assume a normal condition, and they have remained so at last accounts.

In all cases I ascertain as closely as possible the habits of the party. We all know of course that the average woman and many men regard the act of bowel evacuation as a great nuisance—they actually begrudge the time necessary for the act. You ask them as to whether they ever neglect their breakfast or their dinner, and they smile at the mere suggestion and exclaim, “Oh, No.”

I suggested to them that it would appear more rational to neglect to put three meals in their bodies every day than to forget that this body should be rid of the waste accumulation but once a day, and really I find many who have never taken such view of themselves.

Regarding treatment, the most pertinent thing which occurs to me at this time is, that I regard indiscriminate treatment as being the cause of a constipated condition, rather than a means of relief. Such has been my experience in practice and it has been corroborated by brother Osteopaths when the matter has been discussed, in fact I have had cases who had been treated elsewhere who have complained of such results under Osteopathic treatment. I think the chief reason for this lies in the fact that many of us are careless, both in diagnosis and in treatment. I think we should at once take a decided stand against the growing and pernicious practice of the general treatment for everything. If we do not we shall become less scientific and our work will rank with massage, Swedish movement, and the like. Let us in examination be critical, reasoning as to cause and effect, the effect is in the liver, or perhaps in the intestinal tract, or we find the expansive power of the rectum lacking; these are the cause? There exists a specific cause somewhere and I think a specific treatment only is needed.

I never saw Dr. Still give one of our general treatments all the time I spent in Kirksville and the more quickly we cease working like machines the sooner will we advance in our science.

I am of the opinion that rarely should a case of constipation be treated below the twelfth dorsal, for as we know we inhibit or check a too free action of the bowels from the third to the fifth lumbar, so I think that frequently when we work in both regions our work is abortive and of no avail. This has been my experience during several years.

Another observation I have made and which I should like to hear discussed, is that of severe or rather I would term it, deep manipulation of the abdomen. I have noted that this often resulted in the reverse of good effects. In constipation naturally then I am very chary about treating abdominally, confining my work principally to the biliary region, the ilio-cecal, and left iliac fossa regions, and have attained good results when a promiscuous working of the abdomen had not so resulted. This offers us material for discussion.

Constipation has little in common with gastric disorder in my opinion. My reason for so thinking lies in the fact that the majority of cases of chronic constipation have good stomachs. The rule holds good with gastric disorders, they usually enjoy fair bowel action. We can assist ourselves by ascertaining the character of the stools and the kind of food in use. An authority says, when too rapid absorption takes place of the liquids from the feces, the reason may be lack of liquid ingested, which may be helped by large draughts of water.

Again we may be confronted with cases of severe organic disturbance or alteration of the gastro-intestinal-mucosa. As a rule the greater part of the trouble will exist in the colon with occasional severe pains in the upper umbilical region or left iliac fossa during a movement of the bowels. In cases of this character we cannot be too careful as to the diagnosis, prognosis and treatment. I have had several such cases lately and they yielded to treatment only after very close attention to the lower dorsal region and very slight treatment over the abdominal region. I think extensive treatment abdominally in this class of cases rather inadvisable.

I can only say in conclusion that we must apply ourselves continually and good results will follow. Make a close study of each case and constipation and a large per cent of all other classes of disorders will like the Arab, fold their tents and silently steal away.

Before closing I wish to read from Dr. McConnell’s valuable work, as to constipation. We read the following: The vaso-motor nerves keep up the vascular tone of the bowels, the motor nerves the peristaltic action and the secretory nerves attend to the intestinal juices.

Again we read, in constipation, disorders of the spinal column are generally found on the right side. Why this is so I am unable to state. In those cases where the liver is impaired the answer might be because the nerves to the the liver are on the right side, but I find the right side just as often affected when the trouble is in the lumbar region and the nerve supply to the hepatic region intact.

I take it that Dr. McConnell’s observations confirm my idea, that every case must be given its own individual study to insure best results.
WHAT IS THE RELATION OF SEROTHERAPY TO
OSTEOPATHY:

RICHARD G. LEWIS, A. B.

WE WHO are students here can see the beauty and the truth of Dr. A. T. Still's definition of health—that condition of the body in which there is a "normal flow of blood." The definition of disease may be put thus: That condition of the body in which nerve tissue is oppressed. This to me is the Osteopathic theory of health and disease; and it is scientific, for it is true, absolute and universal. Truly the nerve tissue is "the master tissue," and we as Osteopaths need to know it in all its distributions, qualities, actions, powers and tangibilities if we would assist it to prevail over the matter which is oppressing it. Thus it is seen that the real etiology of all forms of disease is the same. The three factors (nerve tissue, the body, and other matter) may vary in form, in position or in power, and different matter and different parts of the nerve tissue, from those at first concerned, may be drawn into the struggle so that the first cause may be observed under different manifestations, named as diphtheria, typhoid fever, dyspepsia, pneumonia, anaemia, and the like. But the principle is ever the same, and upon it we base our treatment of the various forms of disease; we release the pressure, remove the obstruction, correct the dislocation, or the subluxation; we help the underfellow to throw off the opponent who is overpowering him. Our assistance to the nerve tissue is mechanical in its application; the recovery to health is physiological through the action of the nerve tissue by means of the fluids of the body brought into a normal condition.

We know that health is the normal condition of the human body, and that under ordinary circumstances "the master tissue" is able to prevail over all matter around it, so that all the tissue and excretion metabolisms of the body proceed in their orderly natural course. This being the case the body must produce and contain within itself all fluids, constituents, elements, compounds and materials that are needed to keep it in health day after day. All schools of healing admit this, and say that if a person will eat, drink, breathe, sleep and exercise body and mind normally then all the secretions, excretions and metabolisms necessary to this normal state of health will be produced, used and discarded without pain, worry, excess or lack to the body; he will continue in health, for the body is sufficient unto itself in the normal condition. But matter is so changeable, so persistent, so nearly infinite compared with the human body, that in some form, living or dead, it frequently gains the upper hand of part of "the master tissue" and there is the condition of disease, manifested by abnormal secretions, metabolisms, excretions, sensations or motions, which may be partial, temporary or permanent. All schools of healing describe and name these manifestations—these so-called various diseases—in nearly the same words and terms, but each endeavors to "cure" them by its peculiar methods, decrying those of the other schools.

"The master tissue" may of itself rally and throw off the incubus, then the body is again in health and we say "the man got well without any doctoring." Or it may be unable to throw off the oppressing matter and disease may exist for years, neither matter nor nerve tissue being able to overcome the other, and we say "it's a chronic case." Or matter may prevail and the nerve tissue be entirely overcome, and we say "the man died of disease." Before the termination of this struggle these questions arise: Can efficient help be given the body? What must be the nature and amount of that help? The answer accords with the theory of the school to which the doctor belongs—drugs, heat or cold, electricity, animal magnetism, "psychic force" in varying amount or degree. History will show that these means have varied greatly in the same school within the past century. But whatever substances or means have been used all may be classified under three heads: 1. Nutritional, which is the normal and so the best assistance that can be given toward a return to health. But we see the body frequently needs more than this, and help of a different nature. 2. Chemical, which comprises mineral, vegetable and animal substances not given as food; these are the drugs and "medicines" of most of the "doctors." 3. Dynamic, consisting of heat, electricity, magnetism, "psychic force," mechanics, culminating in the scientific treatment of Osteopathy. From these last two classes, osteopathic treatment, in our judgment, is the only truly complete, scientific form of help that can be given to the body in its time of need—the oppression of its nerve tissue. Is it effective? Yes; in all conditions that men claim to be curable where it has been given free, full and competent trial it has proved far more effective than all other means that have been tried. It is yet youthful in years, developed fully perhaps in theory, but not fully in the art because of lack of opportunity, from lack of men who fully comprehend it and the human body, from the short experience of most of its practitioners in its application to the various complex conditions of the body in the different forms of disease. But will its aid be sufficient in itself for all conditions? Theoretically, yes; if we consider that the body's limited in size and power, and is temporary and mortal, while matter is ageless and nearly unlimited in size, amount, forms and powers. Practically, yes; in so far as human judgment and ability can control matter which at times oppresses the body, and in all cases eventually overwhelms it. Yes, osteopathic help to the body in disease is sufficient under all conditions, if applied by the competent operator, the fallibility and the mortality of man being considered. This answer brings up the question: Are the other methods of treatment sufficient? Generally speaking, no; the chemical methods, because they put into the body matters foreign to it that require
to be taken care of by "master tissue," whose strength is needed at the
time to overcome the other matter that is then oppressing it; the dynamic
methods, because they can seldom be applied specifically to the part of the
master tissue needing the help, for their power is diffuse, uncertain and
uncontrollable after entering the body.

Thus far I have endeavored to make plain the osteopathic theory of
disease, and the adaptability of osteopathic treatment to all the ills that
flesh is heir to, far beyond all other systems of the healing art. It can be
seen that necessarily the relations of all other systems to Osteopathy are
foreign, superfluous and in opposition to it. The ghosts will not wing, and
recently one has appeared claiming to be the twin brother of Osteopathy.
But Osteopathy says that he is first born and only son. What then is
the relation of Sero-therapy to Osteopathy? Is it different from that of any of
the other forms of "medical" treatment?

In "The Twentieth Century Practice" (of medicine), in DaCosta's
Surgery, in Crookshank's Bacteriology and in other medical works we find
statements like these: "Some species of bacteria are killed by mixture
with fresh blood," "This property (bactericidal) of the blood belongs to
the serum;" "In healthy blood and healthy tissues bacteria are never
present;" "There is a ample opportunity for satisfying oneself that bac-
teria are never found in the blood in health;" "Pure blood is germi-
cidal;" "The blood is the great antiseptic and disinfectant of the body;"
"The animal body itself generates a germicide more powerful than corros-
ive sublimate."

Again, these writers tell us for Koch, Pasteur, Virchow, Flugge, et al
that the bacteria cannot pass through the healthy intestinal wall; "The
epithelium of the digestive tract is the best protection against the entrance
of bacteria, that an injury is necessary for their entrance to the circula-
tion;" "Micro-organisms cannot pass into the circulation through the
mucous membrane of the respiratory tract or of the intestinal wall so long
as those membranes are intact;" "The exposure of the animal to condi-
tions unfavorable to its existence, or the production of traumatic lesions
predisposes to infection;" "Perhaps the most positive addition to our knowl-
dge in this direction (predisposition) has been the demonstration of the
importance of pre-existing diseases or lesions of structure in affording
ready means of ingress and suitable conditions for the lodgment and
growth of pathogenic micro-organisms;" "We conclude, then, that actu-
ally the only plausible theory of immunity is that which explains it by the
disinfecting properties of the humors (blood, lymph, etc.), by the special
antiseptics of the animal, by the defensive proteids," and many other sim-
ilar facts and conclusions.

From these and their other like statements let me draw some infe-
rences: 1. All admit somewhere in their writings that pure blood is bac-
tericidal in a phagocytic manner, in its serum elements, or in both. This
accords with the osteopathic dictum concerning "pure blood." 2. Most
of them say that bacteria cannot affect the body injuriously unless enter-
ing through an injured tissue, or a structural lesion, or when the body has
been fatigued, starved, bled, or put into an abnormal condition. This
agrees with the osteopathic claim, that the primary cause of disease is
nerve oppression. The bacteria may give the direction of the disease, but
the primary cause (nerve oppression) must be removed before there can
be a return to health. 3. It was claimed day before yesterday that the
action of the serum is chemical—that is a claim of the M. D's for the ac-
tion of their drugs. It was claimed yesterday that the action is physio-
logical—but it is admitted that the injected serum was pathologically
created in another body before injection into the patient, That is but a
slight alteration of the Homeopathic dictum, "similia similibus curantur."
Today it is claimed that the action is nutritional to the leucocytes. But
the serum is neither naturally administered nor natural to those leucocytes,
for it was not elaborated in that body, by the forces of that body and for
that body. We must remember that the corresponding fluids of different
bodies are similar to a great degree, but they are not identical. Osteo-
pathic treatment frees "the master tissue" of the incubus or obstruction
and enables the body to feed its leucocytes with its own elaborations.
How readily and how rapidly these scientists shift their ground. Well,
they are wise to do so. If a man finds himself on untenable ground he
should at once seek another standing point. But take notice that men
imbued with the principles of Osteopathy have not changed their ground
since those principles were first laid down by Dr. A. T. Still years ago.
They do not need to change, for those principles are true and absolute.
4. There is no one serum that will immunize against all bacteria. Only
the pure fluids of each body can do this for it, and for it alone. The Oste-
opathic principle is one for all ailments—promote a normal flow of pure
fluids in the body. 5. The disagreements of the sero-therapists show that
there is no principle underlying their theories; only the claims of personal
deductions from some experiments that prove no great principle. As to
the act of inoculation, it is more or less traumatic. The epidermis and
the corium are there to prevent inoculation and do so if kept in normal
condition. This act introduces foreign matter abnormally into tissues, in
a traumatic manner. Is the puncture too minute to do injury? Consider
that body cells and nerve fibrillae are exceedingly small, and recollect
that the bacteriologists say that one one-millionth of a cubic centimeter
of fluid containing certain bacteria will produce disease. Why may not the
piercing of some body cells and the severing of some nerve fibrillae pre-
pare for the bacilli the ground that without this puncture would prevent
their entrance and growth? The scratch of a pin may be traumatic, as
well as the kick of a horse.

As to some of the "diseases" treated by the sero-therapy method;
some one says that diphtheria seems to be prevented or cured. It is so claimed by its advocates. But last year there were more cases of diphtheria in London than in 1893, and the treatment was not any more successful. Also the death rate in London fell from 59 per cent to 29 per cent in 1894 before the introduction of this treatment. Osteopathic treatment has seldom lost a case where it was used at the beginning of the disease as medical treatment is given. What of tetanus, rabies and others? They seem to be helped or cured. And there are some other diseases in which great benefit is claimed for the serum treatment. What can I say as to small pox? It would require a volume to discuss it, for it is the only “disease” that seems to answer unequivocally to the sero-therapy treatment. Yet in Europe there are Anti-vaccination societies, in which are many men as well educated and as scientific as those who favor vaccination, and they claim that true statistics are on their side. We know this, that small-pox is a “filth disease,” and modern hygiene, good food, proper nursing and care, and good blood will stamp it out. I can say this, that where Osteopathy has treated this “disease” it was more successful proportionately than any medical treatment.

Just here let me remind you that Osteopathy was born in the wilderness, has been taught in the wilderness, and until the past three or four years was practiced in the wilderness, by men who were trying ‘o do good and make money. It had no highly educated, so-called scientific men to promulgate its principles, to champion its claims, to exhibit to the world its successes, heralded by magnificent hospitals fully equipped with competent trained nurses, and all the assisting circumstances of hygienic and financial surroundings. Give it these equally with the other schools of the healing art and its results will far surpass theirs.

Scientists are not agreed among themselves, nor furnish proof convincing to all that their results are due entirely to the sero-therapy treatments; for they are given under such precautions and surroundings that their statistics cannot rightfully be compared with an equal number of cases in preceding years treated by different methods under less favorable circumstances.

From these and from like statements from their own works I judge that Osteopathy—fully understood and applied by competent operators—has no more need of the assistance of sero-therapy than of any other form of medication, and the relation of sero-therapy to Osteopathy is the same as that of all other medication—foreign and opposed to it. The normal flow of pure blood is health. Oppression of any part of “the master tissue” alters this blood flow or purity—that is disease. Removal of that oppression by our methods is Osteopathy; and our methods are fully and always capable and sufficient, considering the fallibility and mortality of man.
These quotations, which might be multiplied by the thousands, coming from men who have spent their lives in trying to advance the interests of health through medicinal lines, are the conclusions drawn from actual experimentation and observation. They prove conclusively to the reasoning mind that there is much deception practiced by the medical men of to-day.

It is a many times demonstrated principle that any appliance which may be contrived to take upon itself the function of any bodily organ lessens the activity of that organism to the extent to which it performs or interferes with that function. In the case of women who are tight laced the system becomes weakened, the muscles whose function it is to keep the trunk in the erect position lose their vitality, until it is necessary to continue the artificial support. Take any other part of the body—the arm, for instance—bandage it so that the muscles cannot act, and in a short time the member will be useless. This is due in part, perhaps, to the obstruction to nutrition, but no doubt more generally to the loss of activity or the interference with its function. Science furnishes many instances in which unused parts have become totally obliterated in time. As an example, take the blind fish of some of the noted caves, which have not even a socket remaining for the eye.

The above will be sufficient to demonstrate the principle that that power is soon lost which has not opportunity to perform its function. But may not there be a similar principle enunciated in the action of drugs upon the human body? The physician prescribes a remedy which he has been taught will stimulate functions that for some reason have become weakened. He does not seek, as does the Osteopath, for the cause of that weakness in some interference with blood or nerve supply; but attempts to put on more steam so that the obstruction may be surmounted. The poor jaded horse is plied with the stimulating whip that he may drag his load over the log which lies in the road-way, instead of the more reasonable and Osteopathic way of removing the log.

We find that Dr. John Hilton, the noted London surgeon, and author of that estimable work "Rest and Pain," has a faculty for getting at truth in a very direct way. He says:

"I have no doubt in the world that the effect of most purgative medicines is to induce irritation and increase secretion from the mucous membrane, and increase muscular contraction in the walls of the intestines. I must therefore express my conviction that the frequent repeated introduction of irritating medicine into the bowels is very likely to do a great deal of injury by exciting muscular contractions, and thence diminishing the caliber of the gut; and that subsequently a great length of time, with carefully managed diet, is required to replace the intestines in a perfectly healthy condition."

Here we see in the administration of the drug there is an attempt to take from the function of the bowel. The muscular and mucous coats of the intestine becomes contracted to such an extent that natural action is impossible. The peristalsis becomes sluggish, the veins distended with blood, the nerve-force paralyzed, and consequent interference with natural secretions. Had nature been allowed to act by the removal of the obstruction, as under Osteopathic treatment, there would have been no deleterious results.

Similar evidence of a more recent origin is found in the statement of Dr. G. H. Patchen, in The Dietetic and Hygienic Gazette for December, 1898:

"As Sedatives, drugs may, it is true, produce a quieting effect upon the nerves, but it is accomplished on by temporarily repressing the flow of nervous energy, not by exerting any restraining influence over the sources of nervous power. As soon as the action of the drug is exhausted the nervous current lose their flow with increased irregularity and impetuosity. Moreover, the digestive secretions are so deranged by the administration of sedatives that their prolonged use becomes positively injurious."

Dr. Hilton again gives strength to the argument by the following testimony:

"The physician often tells us we need something to thin the blood, some solvent that will take away the debris there accumulated. Here, again, he is getting the cart before the horse. The blood needs cleansing no doubt. But why is it stale? Simply because the avenues of exit—of purification—are clogged. Let us, then, liberate that nerve force to the vasomotor mechanism which controls the avenues of circulation, instead of trying to force the debris through the constricted outlet.

The illustrations might be multiplied, but we will find that in every case the object sought in administering medicine is to ply the whip rather than to remove friction. The superiority of Osteopathy is easily recognized when we compare the two methods of treatment by "drawing the deadly parallel."

Columbus, Ohio, "The Ruggery."

OSTEOPATHY IN THE SICK-ROOM.

WILLIAM WEST.

IT IS when one stands on the threshold of the sick room, that the plaintive voice of the sufferer pleading for relief arouses the noble impulses in the physician and makes him realize the great responsibility of his position in the world.

Then, one has no time for prejudices nor is it the place for empty parading, the grim facts are to be faced and as with the broader humane principles and as with the deeper knowledge of disease and its causes so
will the confidence reposed in the physician be firmer, so will fatal consequences be more forcefully combatted.

In presenting a paper upon the scope of Osteopathy for debate, I advocated the broadening of the lines of study from the standpoint of the general practitioner, conceding then, that for the scientific development of Osteopathy the simpler line of thought was of unquestioned value. Nor do I now recede from this position. I do not speak thus for the one man out of many, who has the means and the time and the sacrificing nature essential to the development of a science but rather do I espouse the cause of the body politic of energetic, hard-working men and women who have the field at large before them and who in time will be required to face all conditions of sickness and suffering in the maintenance of their practice.

The chief argument presented to me since the original papers were submitted holds that, as the Osteopathist is a specialist by virtue of his degree, that he is known as such and that there are chronic cases enough to keep all practitioners of the school busy for years to come, therefore it is not necessary for him to know more than will cover these cases or to apply more than the setting of bones and the opening of obstructed channels for the body fluids.

While conceding the honesty of this contention I challenge its practicability. It may not be patent to all but it certainly is to some that the chronic sufferer is no more immune from acute diseases than is any one else. And when the chronic rheumatic is taken to his bed with an attack of influenza, are we to expose him to materia medica with its morphia, phenacetin and quinine rather than to take one step away from the simpler Osteopathy by following the treatment we give with some common sense application of hot water, plenty of blankets and a good fire?

Herein lies the germ. The average patient expects attendance from one physician at a time be he Osteopathist or practitioner of any other school. Thus when the acute attack comes and the Osteopathist discharges the case rather than adopt the legitimate practice of dietetics, hygiene or hydrotherapy the patient becomes driven to drugs medication and when the attack is over if he does not die in it the Osteopathist has another burden to shoulder, another obstacle to overcome before he can expect to place the patient in as good a condition as prior to the taking in of injurious stimulants, depressants or narcotics.

As I have been led by the course in the American School of Osteopathy to interpret Osteopathy as it is applied in the sick room there is no physician in the field with such resources at his command as has the Osteopathist in the intelligent use of the body fluids and the reduction of such anatomical lesions as may cause the disease, as may threaten alarming complications or distorting sequelae. But this is not all. The knowledge of bacteriology is essential in protecting a neighborhood from infection; hygiene is essential lest the poisons of the sick room be allowed to accumulate and become a serious menace to the convalescent; septic surgery must be understood for the health of the practitioner; the essentials of nursing must be known for the proper directing of those, who while not having the skilled training yet are compelled by circumstances to care for the patient.

Learn all you can, apply all that is wholesome and the voice from the sick room will not cry “Stultification.” What the bigot thinks does not matter.

It may be true that, in the practice undergraduates are allotted during their course, the so-called pure Osteopathy is enough, but such has not been my experience nor the experience of others with whom I have talked. On the contrary there have been many acute cases, each of which demanded the specific knowledge of various branches which are advocated by all who have been called into the sick room.

The case of M— is illustrative. There was an imprecation of the transverse colon from the hepatic flexure to just above the umbilicus which resisted manipulation for several hours. A colonic lavage of glycerine followed by three quarts of hot water with the patient in the Trendelenburg position was administered, after which the manipulation proved effective. Here hydrotherapy was simply used as an adjunct to Osteopathy.

The case of B— was that of inflammatory rheumatism. The sick room was damp, dark, small and foul with odors from the kitchen adjoining, from a badly tended kerosene lamp and from a number of cooks. The bedding was hard, knotty, damp and unclean. The student who was called refused to accept the case unless the patient was removed to another room and some attention paid to common cleanliness. Hygiene was here necessary to prevent the recurrence of the colds and chills which in part were responsible for the attack.

The case of J— was one of membranous croup which was fought three times within four hours along the strictest lines of Osteopathy, but kept recurring until the patient made use of warm glycerine in the external auditory meatus as is recommended in the Philosophy of Osteopathy, (page 63).

Such illustrations are at hand to every student and while there may be some who are so rarely and wonderfully endowed that they require nothing but bones and muscles for the control of the pathological organism yet for the vaster majority who are less gifted I make these arguments. The purpose hold them that for the great good work to be done, the student must have those healthful adjuncts which are essential to every sick room.

For the genius I deny no jot nor tittle of respect for his absolutism in Osteopathy but for the great hard-working painstaking body of students and for the conscientious, enterprising and progressive practitioner, I do not plead but demand a suave, smoothness which for no good, honest purpose hold the patient bound to a lifeless office practice. Osteopathy is something nobler than the means to a financial end for a few mercenaries.

It was born in the gloom of a death-smitten home, it was developed by one of the greatest struggles against adversity in the history of humanitarians and its pure purpose of giving relief to the hopeless of all nations and of all creeds makes it incumbent upon its disciples to give relief to all who can be relieved. The honor and esteem the world gives to the physician is his reward for the giving of his all to the sick and the Osteopathist who withholds his hand from the sufferer through a perverted interpretation of his mission is not worthy of the world’s gratitude nor society’s reward.
TWENTY MORE OSTEOPATHS ENTITLED TO PRACTICE IN ILLINOIS,

MORE than one coach full of passengers in travel between Missouri and Illinois on the raw spring day of March 5th, 1900, sat petrified with wonder at the things seen and done by a band of hopeful pilgrims—"evidently members of a theatrical troupe," as one old woman suggested. "Bound for Kankakee—where's the guard?" guessed another. "Now—isn't that audacious bold?" demanded an elderly man of his wife in a stage whisper that echoed up and down the car, while he removed and wiped his glasses for another look, to be sure he did not see double without due and sufficient warrant. "The outlaws should be put off at the next station!"

Really, he had some ground for his consternation—not knowing that a delegation of students from the American School of Osteopathy was going to Springfield to take the state examination. The trifling professional service which he et al., misinterpreted for a public exposition of domestic felicity was merely a neck treatment which Mr. Harris was administering to Miss Bush to overcome the distressing symptoms of train sickness; and when he worked vigorously for the pneumogastrics, first taking off her collar, and then his own coat, some of the passengers gasped and screamed: "Why doesn't the conductor protect us?"

It did not quite set things right when Mr. Bush—the warden of the party—asked from another seat: "Are you better, daughter?" "And—he-allowssuch—attentions—to—his—daughter" gasped the spectacled man's wife, while the girl with the Kankakee theory chirped out, "Oh, he's the guard—I know—and he just let's'em all amuse 'emselves en route!" Several others moaned, whereupon the traveling-show-hypothesis advocate decided it was Mr. Bush, the sire, who was really the heavy villain.

Meanwhile a travel-tired mother at the other end of the car had been spied by Miss McFall and diagnosed across seats as likewise bilious from too much rumble and shaking—sea-sick they would say, on the water. With Miss Hays in consultation these two sisters of mercy volunteered their kindly offices to the needy woman and after a brief explanation loosened her garb and set upon her pneumogastrics. At this juncture Mr. Donahue produced a circulating library of compendiums and text books and the rest of the delegation not hither engaged fell to discussing the ingredients of bile and tears—when to find sugar in urine—and how to expose the abdominal aorta without serious damage to the person.

"Have you wired Governor Tanner to meet us with his carriage?" spake Mr. Sisson to Mr. Hollingsworth; and others mumbled indistinguishable things about "it going to be held in the capitol."

The Kankakee theorist had won her bet by this time and she concluded to go forward to the smoker rather than take her chances in bed-
JOURNAL OF OSTEOPATHY.

THE OSTEOPATHIC SITUATION IN OHIO.

After the supreme court decision in the state of Ohio wherein it was held that the practice of Osteopathy was not the practice of medicine within the meaning of the then existing statutes of the state of Ohio, the Ohio organization of Osteopaths decided that while it was true that the state was wide open to all kinds of quackery in our profession, yet they felt it would be unwise to seek independent recognition when we were so few in numbers in the state unless forced to do so by some drastic medical legislation. They argued that while it was true the supreme court decision only permitted us to exist, and failed to give us any standard of privileges which our profession so much needed, yet it permitted our practice and in time we could by demonstration of our work prove to the people of the great state of Ohio our worthiness and then get the legislation which would be good for us and best for the citizens of Ohio which needed to patronize the Osteopaths. But the introduction of the Love medical bill early in February forced the Osteopaths to enter actively the legislative field in Ohio. The session which has just closed April 16th, at Columbus, Ohio, witnessed one of the hardest contested battles yet waged between medicine and Osteopathy and while it might seem on the surface a defeat for the Osteopaths, yet when understood it cannot help but be considered as quite a victory for our profession. It was clearly the intent of the Love medical bill to exclude the Osteopaths from the state and was reluctantly so admitted by the author of the bill himself. They sought to so define by statute the word medicine that there would be no room for us in the state. Knowing these facts, then when we realize that the Love bill failed to pass in its original form and not only that but had an Osteopathic rider attached, and that the Osteopaths independent bill passed the house almost unanimously, and would surely have passed the senate could we only have had a day or two more time to study the result, the purpose of the medical profession was to drive us from the state, was certainly something of a victory. After the introduction of the Love bill we went directly to Dr. Love and tried in every way that was honorable and fair to have them to either amend their bill so as to exempt us or else include us in the provisions of this bill. But we were glad to understand that he represented nine thousand physicians of the great state of Ohio and that they wanted that bill passed just as it was. And when asked if it was the desire of the physicians of the state to drive the Osteopaths out—his reply was—that seems to be their desire'. We then had introduced our own medical bill which we publish it this issue of THE JOURNAL and it seems to me it is the very best bill we have ever presented and we publish it for the careful consideration of our profession with the hope that wherever the Osteopaths seek legislation they will pattern after this measure. By the time we had our bill introduced in the house it was late in the session and there was a voluminous calendar ahead of our measure. As long as the Love bill was pending there was not much opposition to our bill by the physicians—and it was generally conceded by the members of both houses that both bills should pass. The Love bill passed the senate between four and five o'clock Thursday afternoon, April 12th, and our friends there knowing the session was so near a close felt we should amend the Love bill in case our friends should fail to pass we would then be safe. We had given to one of our friends our amendment simply exempting us—our amendment was substituted by the existing amendment which was framed by the state board of health and presented on the floor by a member who claimed that his amendment was agreeable to us and on its presentation our friends voted for the amendment and then for the bill causing it to be passed. This amendment provides that the Osteopaths shall be examined by the state board of examination in anatomy, physiology, chemistry, botany, zoology, bacteriology, hygiene, therapeutics and nosology—providing said Osteopaths have at-
the Ohio Osteopaths to get together and unite upon a definite plan of procedure and then stay right there and fight it out on that line even if it takes all summer. Especially as I do not believe that the applicants were rejected or a certificate granted. The dates and records of the board shall be prima facie evidence of the facts in the case. The board shall create no expense exceeding the sum received from time to time as fees and fines hereinafter provided.

Section 2. Any person, before enrolling in the practice of Osteopathy in the state, shall, upon payment of a fee of twenty dollars, make application for a certificate to practice Osteopathy to the board of Osteopathic Registration, on such form prescribed by the board, giving his name, age, residence, the name of the school of Osteopathy which he attended, the length of time he was in attendance, the date of his diploma, and such other information as the board may require. If the facts thus set forth, and to which the applicants shall be required to make affidavit, shall meet the requirements of the board as laid down in its rules, then the board may require the applicant to submit to an examination as to his qualifications for the practice of Osteopathy, which shall include the subjects of anatomy, physiology, pathology, principles and practice of Osteopathy, obstetrics, minor surgery, and such other subjects as the board may require. If such examination be passed in a manner satisfactory to the board, then the board shall proceed to issue a certificate.

Section 3. Any person having a diploma from a legally chartered school of medicine, or from a college of medicine or surgery, shall, if desiring to practice Osteopathy in the state of Ohio, be examined by the board, and shall meet the requirements of the board in other respects, and shall be compelled to take a uniform examination before the board.

Section 4. The board may refuse to grant a certificate to any person guilty of a felony, or addicted to any vicious or licentious practices, or unfit to practice Osteopathy, or for any other just cause. No one haying a diploma from a legally chartered school of medicine, or a college of medicine or surgery, or "D.O." or any other title or letters under such circumstances as to induce the belief that the person shall be entitled to practice Osteopathy, with having complied with the provisions of this act, shall be entitled to the privilege of practicing within the limits specified in this section. Such person shall be punished by a fine not less than twenty dollars nor more than five hundred dollars, or imprisonment in the county jail not less than thirty days nor more than one year, or both. Such fines, when collected, shall be paid to the Ohio Osteopathic Registration Fund, and shall be paid out of said fund, upon the demand of any person who shall have been the victim of any such practice.

Section 5. Every person holding a certificate from the state board of osteopathic registration and examination shall have the right to practice to the extent of the duties and privileges conferred thereon. The necessity of the same record the holder shall exercise none of the rights or privileges conferred thereon. The practice of medicine shall be kept, in a book provided for the purpose, a complete list of the certificates recorded by him, with the date of the recording of such certificates. He shall receive a fee of one dollar for making such record. The record of said probation shall be open to public inspection during business hours. Between the first and thirty-first days of December of each year the certificate shall furnish the secretary of the board a list of all certificates recorded and in force, and also a list of all certificates which have been revoked, or the owners of which have removed from the county or died during the preceding year.

Section 6. Any person who shall practice or attempt to practice, or use the system, method or science of Osteopathy in treating diseases of the human body, or any person using the title of "Osteopath," "Osteopath," "Osteopathic," registration, or any other name or title shall be deemed guilty of a misdemeanor and punished by a fine not less than twenty dollars nor more than five hundred dollars, or imprisonment in the county jail not less than thirty days nor more than one year, or both. Such fines, when collected, shall be paid to the Ohio Osteopathic Registration Fund, and shall be paid out of said fund, upon the demand of any person who shall have been the victim of any such practice.
The Journal of Osteopathy.

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KIRKSVILLE, MISSOURI.

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A New Publication.

Several names have been mentioned and discussed for our new publication but finally we have selected "The Osteopathic Arena" for the name of our new scientific magazine. It will be published bi-monthly by the A. S. O. It is designed to be of special use to practitioners and students. The work is to be taken up along special lines. Articles in this publication are to be illustrated by cuts and drawings. The complete arrangements for the scope of the articles have not been made yet but later on a pamphlet will be mailed to every Osteopath giving our plan and setting forth the scope of the work. Our first number will appear about June, 1900. The following departments have been assigned and articles for the same will continue during the entire year.

Department of Infectious Diseases, C. F. McKesson, D. O., in charge.

Department of Nervous Diseases—H. F. Goetz, D. O., in charge.

Department of Physiological Chemistry, Dietetics and Hygiene—A. W. Proctor, D. O., and C. M. Hurst, D. O., in charge.


Charles Hazzard, D. O., of Detroit, Minn., will contribute some special articles.

Samuel D. Barnes, D. O., of Chicago, will contribute a number of articles on Physiology.

The following are also on the list of contributors:


In addition, productions or reported cases of merit and scientific interest or value will be gladly received from any Osteopath.

The attention of practitioners in the field is called to The Question and Answer Department of our new publication. Send your questions in early. They must be questions pertaining to Osteopathic practice. The subscription price is two dollars per year in advance. Send the questions you wished answered and the subscription to The Journal of Osteopathy.

IN THE MAY number of the Ladies' Home Journal, Edward B. Warman in his "Answers to Questions about Health" says "Osteopathy, in my opinion, is all right if the Osteopath is all right." That certainly puts the matter about right. The principles of Osteopathy are true and scientific—the fault, where it exists, is the incompetent exponent of the science. No science of healing disease, especially a new one, could be injured more and brought into greater disrepute, than by the bad results brought about by those who practice or pretend to practice it and do not possess the proper qualifications. Mr. Warman is right, the success of Osteopathic treatment depends upon the Osteopath.

THE AMERICAN SCHOOL OF OSTEOPATHY was never better equipped to take care of clinical patients than at the present time. Practitioners in the field are especially urged to send patients here who are unable to pay for treatment. They will be properly looked after and treated free of charge.

THE A. A. O. meets at Chattanooga, Tenn., July 5, 6, 7, 1900. Elsewhere under this heading appears an invitation by the president of the association and a notice by the railroad secretary. Every Osteopath should make it a point to be present. A great many things of historical interest center about Chattanooga—it and the surrounding country being the scene of some of the greatest battles fought in the Civil War. The scenery about Chattanooga is delightful. The committee on arrangements of which the genial Dr. A. L. Evans is chairman, have so arranged their plans that every one can visit points of interest. Of course these are only side issues, the main interest centers in the work of the association.

THE REV. DR. McINTYRE, of Chicago, lectured at the Normal Chapel on the evening of April 8th. His subject was "But-seasoned People." The Doctor is an able speaker. He understands human nature. Among other things he said: "There is enough love in the world, the trouble is people can't get their love buttoned up." This was the last of a series of five lectures and entertainments given under the auspices of the Y. M. C. A., of the State Normal and American School of Osteopathy.

JUNE 27, 1900, is the day selected for the organization of the Missouri Osteopathic Association at Kirkville, Mo. Every Osteopath now practicing in Missouri who can possibly do so is urged to be present. These state organizations are for the mutual advancement of practitioners as well as the science of Osteopathy. This meeting occurs during the commencement week of the American School of Osteopathy. Many former graduates of the school are expected from all parts of the United States as the annual reunion of the Alumni Association of the A. S. O., takes place at this time.

ATHLETIC NOTES.

The Athletics Association of the A. S. O. organized this term by electing officers as follows:

President, Dr. A. S. Melvin; Vice-President, Chas. L. Richardson; Secretary, E. M. Crumb; Treasurer, Paul M. Peck.

Executive department:


Managers of base teams:

Baseball, Fellows; Tennis, Pettit; Track team, Jones; Football, Peck.

The spring term has never opened with more promising prospects for a successful season in athletics. The first encouraging sign was the enrollment of over 100 new memberships, the first and second term classes each contributing forty members. The receipts from annual dues combined with the balance from the football season and the last field day formed a neat nucleus in the treasury, and provided "the wherewithal" to hopefully equip the baseball team. The treasurer also gave assurance of any support that might be needed.

Few weeks elapsed before Manager Fellows' collars were briskly scissoring about on the baseball field to their new "brilliant array," and performing such antics as would guarantee a hot time for all competitors and followers of the fascinating national game. By electing "Dick" Carter to the captaincy, the team was assured of a veteran general. The initiatory game with the C. S. O., on April 14th, resulting in our victory—12 to 1, gave assurance that with Dodson and Longpre in the box and Carter, Tindolph and "Dad" Spear with the big bat, the principal department of the game was in safe hands. Longpre's right paw has previously won victories for Northwestern University.

The following list of officers of the A. S. O. was pronounced the State Normal team to the tune of 10 to 7. The most promising members of the squad include Mayer, Tindolph, Longpre, Dodson, McManus, Henry, Carter, Pettit, Dobson, Hidakki, "Pap" Spear and R. H. Smith. The stick work in these early games has been particularly good. Manager Fellows' schedule, though now completed, will include games with the
MISS MINNIE DAWSON, formerly editor of the Journal of Osteopathy has located in Frostburg, Md., for the practice of her profession.

The firm of Osburn and Gebhart at St. Joseph, Mo., has dissolved, Dr. Osburn retaining. Dr. Gebhart will continue to practice at St. Joseph.

Dr. H. L. Spangler, of St. John, N. B., was a visitor at the A. T. Still Infirmary last week. He intends to return to St. John in a few days. The doctor has been practicing at St. John since he graduated two and a half years ago.

Harvey Still, D. O., has formed a partnership with Herman Still, D. O., of St. Louis. His resignation of the A. A. O. however is not necessary at this time as Dr. Harry resigned Dec. 1st, 1898, prior to the time he located in St. Louis.

NOTICE.

TO THE OSTEOPATHIC PROFESSION IN GENERAL.

It is the desire of the different committees selected by the president of the A. A. O. to make the annual meeting of the A. A. O. at Chattanooga, July 5-7, a success in every way, and it is especially the wish of the A. A. O. to secure the largest possible attendance and to secure for them the lowest railroad transportation.

To do this I must be able to approximately state the number that expect to be present. Every osteopath in the country should make an effort to make this trip; and whether a graduate or student, whether a member or non-member of the A. A. O., I will confer a favor by notifying the undersigned, at the earliest possible time, if their attendance may be expected. This will be a delightful trip for every osteopath or student and the rate can be secured for either. It will require only a postal card.

Address: EDUCR7 W. GOETZ, D. O.
303 Neave Building, Cincinnati, Ohio.
Chairman of the Board of Trustees, A. A. O. and committee on F. T. rates.

An Invitation Extended.

A measure providing for the lecture method in Osteopathy as a means for popular education relative to the science, has been proposed by the Committee of the A. A. O., and it now remains for Osteopaths to properly use the method to see its benefits.

These lectures (perhaps six in number and under appropriate headings) will be official and known as the "Association Lectures." They will cover as nearly as possible the entire field embraced by the science, and will be designed to assist in meeting the popular demand for information, reflecting at the same time all of the culture and refinement of the Osteopathic profession. They are to be written by Osteopaths, and it is my pleasant duty to hereby extend, on behalf of the board of trustees of the A. A. O., a most cordial invitation to all reputable Osteopaths to contribute one or more lectures to the course, on any subject or subjects relating to our science. These lectures should be sent (prepaid) to the undersigned, (type-written copy preferred) at least by June 15.

They will then be referred to a special committee of three reputable Osteopaths distinguished alike for their literary ability and Osteopathic knowledge, who will select from the lot those which will constitute the official course, crediting each one selected to its author. They will then be furnished in convenient form (only or in sets) to all reputable Osteopaths and practitioners, who may desire them, exactly at cost price.

It is intended that these lectures be delivered in a dignified manner either in public or private by local practitioners or, if desired, by any other competent person; in the latter case it would be advisable for the practitioner to be present to answer any questions which one of the readers may feel from interested inquirers.

It is hoped and confidently expected that Osteopaths will respond to this invitation by sending in their lectures at an early date, that the course may be ready by the time set for the annual meeting in July. Once installed and properly used, the lecture method should tend to the dissemination of Osteopathic information will be second to none in educational value.

F. W. HANNAH, Pres. A. A. O.
Stevenson Blvd, Indianapolis.

Resolutions of Respect.

Whereas: We the St. Louis Society of Osteopaths have been reminded of the fact, that last year the idea of a meeting to be held in the calling home to rest of Mr. W. H. Eckert, member of our society, be it

Resolved: That we the members of the St. Louis Society of Osteopaths, mourn the loss of a pure citizen and staunch friend of Osteopathy.

Resolved, That we by this, extend to the bereaved family the assurance of our deep sympathy; and commend them to seek confidence from Him who doth all things well, it be.

Resolved, That a copy of these resolutions be presented to Dr. W. H. Eckert, secretary of our society and that a copy be presented to the Journals of Osteopathy for publication.

Signed Comtee:

A. H. SIPPY,
E. H. REID,
M. B. HARRIS.

Whereas, little Ethel West has been called from the earth life to the life beyond and the home of our classmate and friend thereby embroiled in shadow. Therefore be it resolved

That we, the members of the Junior Class of the American School of Osteopathy, hereby express our profound sympathy to Mrs. West and her husband in this time of sorrow and desolation. Hoping that the influence of the sympathy of friends and the abiding presence of the Comforter may bind up their broken hearts "till the day of the glad reunion.

C. C. WILSON,
Chairmen:

D. G. WESTPALL,
Mrs. I. F. BROWN.

Y. W. C. A. Notes.

The Y. W. C. A. is increasing steadily in attendance and membership, or a member of the Board of Trustees, A. A. O. and committee on R. T. rates.

The last missionary meeting was one of the best held and was led by Miss Scott of the Second term class.

At one meeting Mrs. Laughlin talked to the young women and gave them great encouragement and inspiration.

On Sunday the 15th, Inst., Miss Tohey—a deaconess, talked and told of her work and of the training schools of deaconesses. She told much that was new to most of the assembly and was instructive and interesting to all.
REPORTED BY J. IVAN DUFUR, D. O., 44 EAST FOURTH ST., WILLIAMSPORT, PA.

CASE 1.

Asthma:—

Mr. C—had been afflicted with asthma for thirty years. During this time he had suffered much, and when he called me he could not walk three squares to his bank. Any exertion brought on a paroxysm, as did also cold or damp atmosphere.

The Osteopathic lesions found were subluxations of the right 4th and 5th ribs, and the left 5th and 6th. After his second treatment he walked 14 squares with no evil effect whatever. He had only one month’s treatment. It has been 8 months since he had his last treatment, and he has had no return. In any way of his former trouble. I consider this a remarkable case, both on account of the extreme chronic condition existing and of the patient’s age which is 70.

CASE 2.

Asthma:—

Was a young lady of 20, who had had asthma for 13 years. She had Osteopathic treatment four years ago with no beneficial result. She was having an attack when I first saw her, and had been treated for three weeks without gaining any relief. Examination showed a very bad twist of the neck to the right, muscles in the cervical region very much contracted; all the ribs depressed. She was relieved at the first treatment, since when there has been no return of the symptoms. I gave her one month’s treatment and discharged her.

CASE 3.

Functional Heart Trouble:—

Miss O—was subject to attacks of palpitation of heart attending extraordinary physical exertion or mental excitement. This condition had existed for about 12 months, when she came to me for treatment last October. Examination showed a subluxation of the 5th rib, which was repositioned in one treatment. She has had no return of trouble since then.

CASE 4.

Neurasthenia:—

Mrs. B—a case was one from which she had suffered for eight years. She is 32 years of age and the mother of four children.

History: After birth of her second child puerperal fever followed from the effects of which she was confined to her bed six months. During fourth term of pregnancy she suffered an attack of cerebral inflammation. She remained in bed 8 months after labor (I may say that in the birth of each of her children labor lasted for 14 to 45 hours, and physician finally resorted to forceps). After last confinement symptoms of neurasthenia appeared, and she went to Philadelphia for treatment, with no beneficial result.

Symptoms: Insomnia, irritability, depressed spirits, constant weariness, restlessness, head aches, vertigo, cold and clammy hands and feet, constipation very marked, ovaries congested, amenorrhea had continued since birth of first child, 10 years ago. But at about time for the regular menstrual period patient suffered a complete physical collapse, all organic life being deranged; the heart, stomach and kidneys being seemingly most affected. At these times micturition was very painful and retention of urine quite common.

Examination: Third cervical vertebra to the right; ribs depressed; lesion between 11th and 12th dorsal vertebrae; 5th lumbar posterior; lumbar muscular contraction entire.

The examination convinced me that the seat of exhaustion was in the uterus and appendages; the failure of the mesentery due to the faulty blood and nerve supply to the uterus, consequently to a lack of nutrition, the whole train of attendant symptoms being due to reflex irritation of the various other organs. Treatment along this line proved its truth, for after two weeks’ treatment the menstrual period was passed with a normal flow and none of the former symptoms appeared.

P. S. I never print the testimonials which I receive, but the names of the parties referred to in the above report can be had by writing to me.

**

CASE 2.

Acute Nephritis:—

Mr. Nolan a well built man and aged nearly 40 years was recently taken ill with severe pains in back. Amount of urine passed in twenty-four hours nearly two quarts, specific gravity 1030, due to large amount of urea and phosphates. Family history good and good health up to two years ago, when he had a severe and protracted case of nephritis. Upon Osteopathic treatment of 10th to 12th vertebral inclusive and raising of 11th and 12th ribs, relief from pain was at once obtained and in two weeks apparent good health was restored. Cause of trouble an irritation of renal splanchic nerves and cured by removal of irritation.

CASE 3.

Asthma:—

Dr. B. A. Murray, dentist, who is a Canadian and aged 27 years came to me last August 23d, and upon examination it was found that the 5th and 6th ribs on left side were down, causing an irritation to nerves in that region which with their in-
tribute relation with nerves of respiration caused asthma, also that especially the 6th and 7th ribs on right were drooping causing stomach trouble. It was then learned that Dr. M—had taken treatment of eminent doctors of Canada, Boston, Chicago and Denver—but without relief. One month's manipulation peculiar to the science of Osteopathy completely cured him, he never had the asthma after the first treatment. He spent two weeks in Chicago during the holidays and the inclemency of the weather and exposure caused a heavy cold but no asthma.

Another case—a Mr. Myers aged 47; examination proved that ribs from 1st to 8th, were down and congestion or marked contraction of spinal muscles of same region, also an irritation of pneumogastric nerve at axis and atlas and bybod bone slightly depressed, which was more especially the cause of bronchitis although a prolonged case of asthma tends to bring on bronchitis or bronchial asthma.

Mr. Myers has not had asthma over eight months but upon taking cold is still bothered with bronchitis due to my inability to entirely remove irritation to pneumogastric nerve.

Paralysis of Fingers:

Mrs. L. H. Loomis, Lyndonville, N. Y., aged 79, general health exceptionally good for a person of her age. Patient had been suffering a year with nearly complete paralysis of the last three fingers, especially the last two on right hand. Was unable to flex the affected fingers at all and any motion of them was very limited. Upon examination I found in the spine a slight lateral lesion of the 1st dorsal causing an obstruction which interfered with the normal action of the ulnar nerve. (The ulnar which in normal conditions, supplies these affected muscles, is the largest branch of the inner cord of the brachial plexus.) Upon questioning the patient, found that a short time previous to the showing of the paralysis, she had fallen and, as she supposed at the time had sprained her wrist. Treatment which was applied to the cause, the affected region in the spine, with view of correcting the lesion and thereby establishing normal action, was begun Sept. 18th, last. Case showed marked improvement by the end of one month's treatment, having given three treatments per week. There was then a cessation of treatment for about ten days as the patient was called home. Patient was discharged the following Nov. 3d, having regained complete use of her hand and fingers. Have since heard from patient in person writing and her hand continues well, which proves that Osteopathic cures are permanent because natural.

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