Osteopathy Facing a Legal Crisis!

THE OSTEOPATHIC PHYSICIAN

THE OFFICIAL BULLETIN OF THE AMERICAN OSTEOPATHIC ASSOCIATION.

Volume 2. Chicago, September, 1902.

Number 4.

OSTEOPATHIC LEGAL SITUATION CRITICAL.

Alabama Supreme Court Decision Upheld Old Legal Status.

JEOPARDIZES OUR SPECIAL STATUTES

Profession Must Rally to Support the Alabama Practitioners and Institution as New Basis Equal to the Regulars.

While satisfaction has been expressed in some quarters that the Supreme Court of Alabama has decided finally that Osteopathy is the practice of medicine, as the same that enamours the term medicine in framing legislation to control drug practice, it does not strike the Osteopath of that state in the light of a victory. Twenty were in practice before the new bill. All had their names upon the register, it is said, but five. While all enjoyed satisfactory practices, the prospect of paying repeated fines—after Dr. C. E. Bragg of Birmingham, lost his appeal to the supreme court, death overtook him and stay and fight it out.

It is impossible that our friends in Alabama will make some sort of a fight to pass an Osteopathic law this winter. So the matter stands just this way at present:

1. Osteopathy has received a decision in Alabama that it is equal to and on the same footing as other schools of medicine.

2. The 2,000 M. D.’s in the state, having this constant struggle to fight with, are making it warm for us that three-fourths of the osteopaths are credited with surrender and flight.

3. The few who remain, even granting the warmest support from the friends we have in the state, are in an uphill fight, and it is hardly reasonable that the friends of Osteopathy are going to pass a law for us. Friendship doesn’t go that far.

Five against 2,000 is like the odds against the ancient Spartans who, in the history of the world, went down on hundreds of men in an uphill fight, and it is hardly reasonable that the friends of Osteopathy are going to pass a law for us. Friendship doesn’t go that far.

Now, who is going to do this work? Shall we have any weapons to fight with, of course—and the weapons in this case are dollars—but it is bad for the cause that the little band of Osteopaths broke and ran; it is against the moral of our own cause; it will, beyond doubt, make it necessary to recover lost ground first before taking an advanced position. If we mean seriously the revolution in the state and get compulsory legislation.

What is going to do this work? Shall the five who are said to remain be left to fight this battle for us? Shall we all in other states—whose right to practice is jeopardized as those of Alabama practitioners—sit idly by and see the cause vanquished?

It must be remembered that a precedent in Alabama is almost as binding in court work in any other state as a local statute would be, and in the absence of a statute that precedents are what govern. So we cannot afford to let this adverse precedent stand, and we must do all that is possible to give the Osteopathic professional standing.

It may be all right to let the decision stand. Some of the most far-sighted Osteopaths have contended from the outset that special Osteopathic legislation is wrong, because artificial, and must some day be repealed when Osteopathy will be declared to be—not a hybrid, but “a school of medicine” within the meaning of the law. Perhaps this Alabama decision is the beginning of the fulfillment of this prophecy. Dr. J. Martin Littlejohn and I, believe, Dr. Howard Kretschmar, also, have taken this attitude regarding Osteopathy. In the main, it appears. I am about to take up the case as an issue.
The third annual convention of the Michigan Osteopathic Association was held at the Cook House, Ann Arbor, on Saturday, September 6. The meeting was well attended, some thirty members being present from various parts of the state. The morning session was devoted to clinics and to papers on subjects of interest to osteopaths in general and to Michigan osteopaths in particular. An opinion of the Attorney General was read, in which it was held that regular osteopaths have the right under the state law to sign death certificates. This was a surprise to some of the members present, as a Flint judge in the case of State of Michigan vs. Dr. Cully pronounced it to be a crime to sign death certificates.

The afternoon session was devoted to the reading of papers. W. S. Mills, Ann Arbor, read a paper on "The Diseases of Women" and it was stated by members of the examining board that exceptionally good papers and high averages were the result. Certificates were issued to Dr. C. E. Stuart, of Butte; Dr. Daisy D. Rigger, of Red Lodge; Dr. Helen E. Walker, of Great Falls, and Dr. Vina Beuchamp, of Dillon.

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has recently absorbed the Northern College of Osteopathy of Minneapolis, the oldest college of its kind in existence, with one exception, and also the Northwestern College of Osteopathy, of Fargo, N. D. The consolidated institution has now 590 graduates and post-graduates in the field—practicing successfully in practically every state and territory of the nation.

It has 350 students in attendance from 32 different states, from Old Mexico, the Dominion of Canada and the Hawaiian Islands. Its faculty has the largest number of graduate osteopaths, of the largest experience, actually doing regular class-work in any Osteopathic College. Its building and equipment are unexcelled and its location is ideal.

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HENRY STANHOPE BUNTING A. B., D. O., Editor.

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Fairness! Freedom! Fearlessness!

EDITORIAL.

Don't hang out on piccadillys, but get in and help!

Rate cutting and throat cutting are synonymous.

Use OSTEOPATHIC HEALTH in your field and keep in front.

Don't cut rates, doctor. It is like cutting one's own throat—that is, it is not profitable.

It is a privilege as well as a duty to be a member of the American Osteopathic Association.

It is the prayer of every osteopath that our schools will forget past differences and bickerings.

Report your meetings to "THE O. P.", It is the official bulletin of communication for the profession.

It is a good thing for Osteopaths to do review work in dissection now and then when they get into practice.

If you have any live thoughts about the problems besetting Osteopathy, send them in to our "Open Court."

"Hike" seems to be the osteopathic watchword in Alabama. Too bad! Victories are not won by running.

Three-year courses in the future enables osteopaths to make a better showing in courts and before legislatures.

There isn't room in the profession for "knockers."

When you see a "knocker" at work cut him out of the circuit.

An Osteopath is a physician or he is nothing.

Let us do the work that does not create foolish distinctions without differences.

The practitioners must wake up to the fact that they possess a national organization now which is capable of fighting their battles for them.

Every Osteopathic physician has a right to sign birth and death certificates or he has no right whatever to treat human ailments. Which shall it be?

The Osteopath needs few things as much as good literature. Good literature makes good friends. OSTEOPATHIC HEALTH is good literature.

If you want all the local osteopathic news played up in this journal, send us every newspaper clipping that you see relating to Osteopathy.

Publications can't live on wind. This journal is to serve you and build up your profession.

It is a Boon to the Practitioner.

The Osteopathic Physicians—One and All—together.

There is a work to do, and it can only be done by getting together. The bells have tolled defeat and rout to Osteopathy in Alabama.

In most states the Osteopathic is neither "fish, flesh nor fowl" before the law. That is unfortunate. We need a uniform policy, a uniform campaign and uniform statutes. Only the promptest and most loyal support of the A. O. A. on the part of every practitioner can secure these things.

"THE O. P." wants a live student agent in every osteopathic community. It wants a live agent in every class in each college. We want every osteopath to act as our agent in every state in the union. We will make it worth while to students to serve us in this capacity. Write us if you are ambitious.

How do you think, fellow practitioners, that "THE O. P." will pay its bills and continue to serve you if you do not subscribe to it? It has asked no subscriptions in advance on presenting a prospectus; but now that its good works are in evidence, it appeals to your sense of fair play.

Some schools bid for student recruits by advertising immense sums that Dr. Helmer, of New York, offers to "make a fortune" by giving a prize of $1,000 to the best student. It is the American Osteopathic Association, not the libraries of natural science, that is capable of fighting their battles for the profession in the way of mercenary accusations.

One good way to be sure that every Osteopath in every state is a "knockout" is to make a state organization to make it your business to see that every D. O. within your state is a regular member of the A. O. A. The American Osteopathic Association always offers that opportunity, and the speed with which you subscribe to it and report your news to it will be taken as a proof whether or not the profession has any serious desire to get together.

Osteopathic Health’s Book Prizes Are Worth Winning.

Three months ago OSTEOPATHIC HEALTH offered over $60 worth of prizes in books to the winners in its contest for writing the best popular short articles on Osteopathy. Above five persons to date have entered the contest. We want more. We want more than one hundred copies of OSTEOPATHIC HEALTH for the month of September to arrive at our office. We welcome the contributions of our D. O.’s, and as we wish to make the race worth running, we have decided to extend the contest to March 1st. If you will subscribe to OSTEOPATHIC HEALTH for the month of September, you will have an opportunity to win one of those books. Send in your subscription at once and don’t miss a single number.

New Jersey sets the pace for state associations. Every D. O. in New Jersey receives "THE O. P."

Because Dr. Norringer took it upon himself to see that they got it! What shall we do in the osteopathic realm can show a like record?

From the perusal of the June, July, August and September numbers of "THE O. P.", it is evident that this paper is taking the right stand. What shall we do for legitimacy, respectability and high standards, the sort of philanthropy that impels him to work for nothing should enlarge his free clinic and necessarily his patient list.

The practitioner whose heart is overflowing with the sort of philanthropy that impels him to work for nothing should enlarge his free clinic and necessarily his patient list.

The American Osteopathic Association stands for legitimacy, respectability and high standards.

Every Osteopath interested in seeing his State Association properly represented in these columns should make it his business to see that the official bulletin of communication for the profession.

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The American Osteopathic Association is the prayer of every osteopath that our profession is worth supporting.


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changed.
The profession is too bulky to run by digestion alone, you know, saying that "God takes care of fools, children, and the United States," but the profession cannot go very far on positive assumptions, and if its interests are to be taken care of in the future we, the profession — you and I, must see to it.

There is no one to do it for us. Old Judge El­liott—as our tower of legal refuge, our gratuitous counsellor, and our legal responsibility for the benefit of the Association. Schools cannot be expected to do for us unaided what we must do for ourselves. The Association will do it, they will cooperate, to be sure, with both advice and cash wherever it is needed to employ counsel and print. The schools may be yours or mine, but we, as a profession, are full grown, and it is up to us to act in our own defense or be swept off our feet. You, as an officer, can do your bit in putting Osteopathy where it should be! Think what a grand JOURNAL OF THE ASSOCIA­TION it would publish monthly! Think in every way what it would accomplish to make us all strong and stand like a tower of strength.

But be much more moderate in our views.

One thousand inside the Association would give us a voice in Congress. This does not enable us as a profession to do practically all we need for our cause, but it does enable us to threaten to the Congress, as practitioners by this time we ought to be able to do so, that the breech and furnish the guiding mind, the firm hand, the ready purse, the determined pluck that are the qualifications of a legitimate practitioner in the field is inside the Association now.

Remember that the A. O. A. as it stands is but the shell of an organization—some 260 peri­odic publications, the name, the office help, the staff of army officers, ready to fight, but with no groups behind them to storm the barricades. The call to arms would not always be answered by the ro­sters ask your signature, D. O. The cause needs help! At present it costs the Association 50 cents to THE O. P., and you will be duly enrolled among the fighters in this campaign of the Association.

Your hope of being able to sign birth and death certificates, to use the title of Doctor, as any physician could, to practice without mortal­ation lies in the integrity, growth and bank­ruptcy of the Association. The A. O. A. is the ope­tion to all of us, after this much in­vestment cost, as one of the fighters in the war of the Association—before the convention in no way what it would accomplish to make us all strong and stand like a tower of strength.

The Osteopathic Physician

Osteopaths Want Doctor's Rights.

St. Paul News, Sept. 6

Minnesota Osteopaths will ask the coming legis­lature for the right to sign birth and death certi­ficates as attendants, and to have the present medicaliziners.

At the Milwaukee convention an important question was discussed which set many osteo­paths to thinking. It was not thrashed out to finality but was given great discussion, with questions involved the doctrine of direct or indirect, spe­cialized or generalized treatment in spinal curva­tures and the whole subject of bony lesions, espe­cially the point whether bony lesions are to be practiced by the Association, and how they are best corrected by mediate or immediate treat­ments.

In the hotel corridors, at least, disputants made a sharp definition between the two contending principles of treatment, and it became com­mon to hear the advocates of the direct and lim­ited specific treatments referring to their party as "exclusive" and their opponents as "condo­minant".

"Are you a lesion osteopath?" has deeper mean­ing than any other question.

This question does not mean merely "do you believe in the doctrine of lesions?" which is but another way of asking whether you believe in Os­teopathy? A number of practitioners so con­cluded the query and answered as did Dr. C. P. P. McConnell, with such interrogations as "Who believe in the doctrine of lesions?" which is but a mis­understanding of the association. The A. O. A. is the only body else may ask your signature, D. O. The cause needs help! At present it costs the Association 50 cents to THE O. P., and you will be duly enrolled among the fighters in this campaign of the Association.

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THE OSTEOPATHIC PHYSICIAN

DIRECT TREATMENT FOR TUBERCULAR SPIINES.

The Osteopathic Physician has just reached me, and in looking over the report of the Milwaukee convention I saw this statement under the caption "Are You a Lesion Osteopath?" Dr. Forbes says that he never had advised the treatment of curvatures with braces—and there you are. I was at Des Moines during the recent Iowa Osteopathic state convention and saw Dr. Forbes use and hear him recommend the use of a plaster of paris jacket in a case of curvatures. He was not aware that there was a tuberular case. I don't know whether it was, or not, hence I will not dispute the diagnosis.

But suppose it were tuberular? Should the use of the braces be advised? I would say, rather emphatically:

"No!"

My reason for this statement is the successful treatment of hundreds of cases of all forms of curvatures and Pot's disease osteopathically and the colicky pains of brassy cast, etc., which have been removed. Changing the subject to a general one, I will say that I have found it extremely hard to improve the mechanical method of treating diseases, from a dislocated hip to typhoid fever, inclusive. All the cases in which there was a tendency on the part of a few to wander away—if that is the word in serious disease—I have gone into the true Osteopathic idea as taught by Dr. A. T. Still. There is the running after false gods, for example, general massage—I wouldn't dignify it with name of treatment—hydrotherapy, electricity, et cetera. Such are sometimes used as adjuncts to Osteopathic treatment, provided the physician is ignorant of the real condition. Dr. Still does not use such methods; yet he cures his patients.

The successful Osteopaths practice Osteopathy, not medicine. A one familiar with the profession can point them out. Why are they successful? Because, in the first place, they believe in Osteopathy; and practically are ignorant of other supposed methods of healing; and secondly, they have applied Osteopathy for results. Dr. Herbert Bernard's paper at Milwaukee had the following expression:

"From the above one might surmise that I am one of the "lesion" Osteopaths. I certainly am, although I have seen cases in which I could cover no lesion. Yet Dr. Still has taken such cases out of my hands, has located a lesion, has corrected it, and, mirabile dictu, the patient recovered! Even in curvatures and Pot's disease he finds the cause, puts the braces on, and supports the spine—yet he cures them! Let us follow his example.

Kircskille, Mo.

M. E. CLARK, D. O.

DOES NOT BELIEVE IN PLASTER CASTS.

I wish to drop a line in regard to specific treatment, and the discussion of spinal curvatures sprang at the Milwaukee convention. I am certainly favorable to the specific treatment. First, I never saw the old Doctor give any other kind, and he is certainly good authority. I would like to know why he could not do the same, every condition. Correct the cause and stop. When I hear an Osteopath say "treat a certain part of the body," that only means to me that he is massaging that part—which is not Osteopathy.

As to the treatment of spinal curvatures, there is certainly a large field for thought. Much has been accomplished, and there is a great deal yet to be thought out, especially as to causes.

I heard Dr. Forbes in an address at Des Moines, la., at the meeting of the State Association this summer, exhibit a case of spinal curvature which he had treated with the plaster of paris which he made for the patient. After the thousands of failures recorded against the cast and braces, I am inclined to believe that if Dr. Forbes had gone back into that old medical habit. One of the things he has always taught is to pull off the casts and braces, and his success has proven the wisdom of his way. Osteopathy as taught by A. T. Still is a principle. That principle is to remove the cause, and we can be sure, then, that nature will do the rest.

Kansas City.

W. J. CONNER, D. O.

"O. H." Wants a Million a Year Readers.

GO STRAIGHT TO THE SPOT.

I have been much interested in the discussion which took place at the Milwaukee convention, and can easily understand why Dr. Forbes and many followers to his theory, because his method to prove his theory at first sight and thought would seem to every man at first glance, to be well in a living column as on an artificial spinal column.

However, I take the opposite stand from Dr. Forbes and claim that in curvatures in the living spinal column there is something nearer the median line than the spinal processes. I wish to call attention to the actual condition of the axial points on the living spine, and to explain the inefficacy of drugs—superficially and in a live body, in the spine, and compare it with the spinal column robbed of all relations and mechanical principles except those of articulation, of one vertebrae with another, and having a strong rod in place of the soft and pliable spinal cord, which otherwise is so little resistance, that, mechanically speaking, is not to be mentioned.

I wish to advance this idea which I firmly believe, namely, that the center, or axis, in which the living spinal column, mechanically speaking, is a point, or, possibly, posterior to a point of intersection of two lines drawn at right angles anterior-posteriorly on the living spine; therefore, the mechanical principles involved in a living spinal column are entirely different from those involved in a cast, or a plaster of paris jacket in a case of curvatures in a living column, which has a steel rod for a spinal cord.

The Osteopathic Physician has just reached me, and in looking over the report of the Milwaukee convention I saw this statement under the caption "Are You a Lesion Osteopath?" "Dr. Forbes correct in his theory, my results would be more successful? Because they studied Osteopathy; they are medical practitioners in the widest sense or the term, and are entitled to a name, which I firmly believe, namely, that the center, or axis, in which the living spinal column, mechanically speaking, is a point, or, possibly, posterior to a point of intersection of two lines drawn at right angles anterior-posteriorly on the living spine; therefore, the mechanical principles involved in a living spinal column are entirely different from those involved in a cast, or a plaster of paris jacket in a case of curvatures in a living column, which has a steel rod for a spinal cord.

As a student in two of the old schools of medicine, regular and Homeopathic, I see as an Osteopath, I can speak somewhat impartially. I hold the word medicine, in the larger sense, as Dr. E. R. Booth puts it: "MEANS LITERALLY THE WORK OF HEALING THROUGH THE AGENCY OF A PHYSICIAN." In this sense I have always contended that Osteopathy is in the line of apostolic succession in medicine. To use the word medicine in the narrow and limited sense of drugs, "is not warranted, either by the etymology or the most common use of the word, nor by history of medicine." (E. R. Booth, D. O.)

We, as Osteopaths, are medical practitioners in the widest sense of the term, and are entitled to a name, which I firmly believe, namely, that the center, or axis, in which the living spinal column, mechanically speaking, is a point, or, possibly, posterior to a point of intersection of two lines drawn at right angles anterior-posteriorly on the living spine; therefore, the mechanical principles involved in a living spinal column are entirely different from those involved in a cast, or a plaster of paris jacket in a case of curvatures in a living column, which has a steel rod for a spinal cord.

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"GO STRAIGHT TO THE SPOT."
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THE OSTEOPATHIC PHYSICIAN

When it has been said of a Book

That

"It would not only be a good book with which a student might begin the study of medicine, but every boy and girl between the ages of 14 and 20 should read it. It deserves to become popular and sell by thousands."—Dr. J. D. Brock, Dean of Park Medical College, Oscawanta, O.

That

"Dr. Pratt has clothed dry facts in garments that glister. He entertains while he educates."—Birmingham (Ala.) News.

That

"It instructs more in two hours than one can possibly obtain from any existing library in two months."—Wallo Walla, Wash.

That

"It should be adopted as a text book in every school and be found in every house."—Jamestown Daily Gazette.

That

"This book should be studied by every class in physiology. It will give unexpected interest, vivacity and impressiveness to the subject. I shall put this book into the hands of my classes in physiology and will not require the knowledge of the subject as satisfactory until they have made a careful study of Pratt's 'Composite Man.'"—Geo. Sutherland, Grand Island College.

That

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(Continued from page six.)

Dr. Littlejohn on Alabama.

(Concluded)

this eminent jurist in all his labored opinion. But, as practitioners, we are not to be regarded as philosophers, we are to judge our cases, and not like the Melanchusenck priesthood. We are entering a profession which has a history, certain rights and privileges, and which is recognized by a civil law, not by a canon law, and hence, if discrimination takes place against a physician in one state, a civil procedure remedy in the case of refusal to recognize in the granting of licenses. This means open competition.

Now, granted equality, in right, privilege and obligation, the question is one of qualification, and the moral status to back up qualification. Who shall judge the qualifications? The old scholar or the practical and with some of the theoerapeutics of Osteopathy is new. This means the judging of Osteopaths from the Osteopathic standpoint.

Now, the question resolves itself into this, who is to do it, and how is it necessary to enable the practitioner to become a thorough DIAGNOSTICIAN and a thorough THERAPEUTICIAN from the Osteopathic standpoint? Is every student qualified after four years, or shall we throw them out to themselves and let them scramble? Is it not better to have the students educated to the highest standing, and have them graduate with a degree? We do not sacrifice the brotherhood of the healing profession when we stand upon our own independent ground. We do not want to learn anything of advantage in his diagnosis and treatment of disease. We can gain nothing either from the Osteopathic standpoint, or by trying to consider disease from a dual standpoint. To do the latter is to perplex and perplexity is of no advantage to us. We want a definite plan of performing a giant labor. This means to carry the medical profession in every legitimate D. O. in your state is a bona fide subscriber. It is the official organ, and that every practitioner must use it. It is the organ of each state association also. Use it. Send in your news and communications to it. It is an economical plan of performing a giant labor.

Osteopathic standpoint? Our system is unique in style, but presents its subject in its own. We do not sacrifice the brotherhood of the healing profession when we stand upon our own independent ground, and our system is not co-extensive with the healing art. It seems to me, instead of needing a medical education, we need greater research from the strictly Osteopathic point of view, rather than attempting to spend efforts in studying the regular medical courses.

This does not prevent us in our own colleges from doing this work that is necessary to supply the demand for information of those who want an "all-round" view of disease. Some, at least, of the student is a COMPARATIVE standpoint, taking the Osteopathic system as the independent basis and comparing other methods in theory and practice with our own. This is an advantage to our own college walls. Then we have not an Osteopathic College in the field. The extensive pharmacology and materia medica of the system of other systems may be as well as better known by our student. We stand upon our own co-educational and its pages each month are full of timely, well written communications, and its columns are well filled. It is the official organ, and that every practitioner must use it. It is the organ of each state association also. Use it. Send in your news and communications to it. It is an economical plan of performing a giant labor.

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THE OSTEOPATHIC PHYSICIAN, a monthly newspaper, is published from the same office, and this paper we also publish with pleasure. We cannot have too many good publications representing the Osteopathic system, and we are pleased with the compilation of so-called Osteopathic periodicals there are plenty, but there is no danger of our being swamped with publications of the standard maintained by OSTEOPATHIC HEALTH and THE OSTEOPATHIC PHYSICIAN.