Anatomical and Physiological Pictures of Diseases†

Tuberculosis.

Being Chapter IX of This Series by Dr. E. E. Tucker, of Jersey City, N. J.

I

T is not enough to say that the germs are there. Why are they there? Dr. Still has again and again said that he can be little better than an atheist who presumes to interfere with nature's processes when he does not know what is occurring, nor why it is occurring. That is the great osteopathic article of faith.

Why are the germs there? And that which we must treat is the why, rather than the germ. In time the world should begin to see that the germ is just like the disease; the disease in itself is nothing—the germ in itself is nothing—the disease is merely a group of changes which belong to a certain condition of the body—the germ is merely the fungus which preys upon that condition. The germ is thus a kind of disease of a disease, and would disappear if the first were to disappear. Just as the first would disappear, the condition of the body were to disappear. Of course, the changes themselves add to the danger, or constitute the only danger; so with the germs; but they are nevertheless secondary.

The statement is generally accepted that practically everybody* has, or has had somewhere in his body a tubercular lesion. Should the body, at that time, be weakened by this first disease to which tuberculosis is secondary, there would be a different tale to tell in all probability. But the germ alone, it will be seen from this, is not so dangerous as to constitute a daily malady.

What is this disease—this primary disease? Tuberculosis is the disease of the disease—what is the disease itself?

The following circumstances present themselves as being related and pointing to a conclusion: That the tubercular abscess is a gland abscess; that the battle against the germ is not associated with much congestion; that the first and most noticeable effect of the injection of tuberculin, the anti-body to tubercular poison, is heat and redness and the re-establishing of circulation through the part; that the weakness which allows growth of the germ may be greater in one locality than in another. The indication of these circumstances is that the weakness on which tuberculosis grows is one of circulation at the affected part; this weakness corresponds with a weakness of the responses due to cerebro-spinal nerves—a weakness of the physiological response to irritation and injury.

We have here, then, one of two conditions—either such a condition of the cerebro-spinal nerves of the part that their action in producing the typical congestion under the influence of this irritant is withdrawn or impaired; or a secretion of the germ which has the power to produce or simulate such a condition; or both. The secretions of the glands have been shown to have such an action, but not a very powerful one, and not able to explain a predisposition. Only where there is repeated or continuous exposure to the germ would this action enable it to generate the disease. There is left only the supposition of disease precedent to tuberculosis which allows tuberculosis to develop as it should be, those conditions which simulate the action of the germ itself.

We have, secondly, these conditions preceding when there is impairment of the cerebro-spinal nerve force and the conditions that follow in its train—lowered blood pressure, impaired nutrition, weakened cell resistance. No doubt either causes than impaired nerve force may lead to the same conditions, and may therefore cause the predisposition.

If this conception of the primal condition of tuberculosis be true, there should be some evidence of it in the blood pressure and in the cerebro-spinal system itself. Quoting Lawson Brown, M. D. (Osler's Modern Medicine, "The Symptoms of Tuberculosis"), "Blood pressure may be lowered from the very outset, and some have held that hypotension is present in the predisposed. A much greater variation is between the blood pressure in a reclining and in an upright position, than in health. The hypotension is held by many to be due to the tuberculin, which undoubtedly lowers tension. (Tesser.) This instability of the pulse has some connection with the decrease of blood pressure and a paresis of the vessels. The vasomotor nerve supply is very unstable. * * * Palpitation in neurotic subjects is usually a venous phenomenon associated with hypotension. Vaso-motor disorders are the most frequently mentioned of all neuroses in the disease. With regard to the cerebro-spinal nervous system in this affection we may quote the same writer: "Psychoses are very much rarer in pulmonary tuberculosis than pulmonary tuberculosis in psychoses. * * * The nervous system is often early affected and few patients entirely escape some nervous disturbance. * * * A tuberculous family taint is supposed to render the patient liable to such. * * * Neurasthenia is more common in pulmonary tuberculosis than in any other disease." Various forms of psychoses form an impressive array in the descriptions of the disease. The indication is on the whole that the nervous system is primary and the tuberculous, but aggravated by it.

* * *

The anatomical lesions in tuberculosis are usually found by osteopathic writers in the upper dorsal region. With regard to this, we may quote the same author:

"Hyperaesthesia of the skin is common. It is rarely noticed below the third rib. "Pulmonary disease can cause, as Head has shown, referred pains, irritative phenomena, hyperalgesia and neuralgia, in the skin of the neck and thorax by the connection of the sympathetic and vagues. "Night-sweats: Cause: The sweat glands are under the control of centres which can stimulate or inhibit the secretion." These centres are found in the upper dorsal region.

Dr. W. Banks Meacham in the A. O. A. Journal and others attribute the genesis of tuberculosis to preceding nutritive disorders, with disorders of digestion. This view has been extensively held by medical practitioners. An anatomical and physiological picture of  

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†The Nargellig, 89 per cent Nargellig, 91 per cent Burkhartt, 80 per cent Harbitz.

Dr. T. L. Holme, of Bolckow, Mo., who did valiant service in the Nebraska Legislative fight.
such disorders with what has gone before will go far towards clearing up the etiology of tuberculosis.

The abdomen may be regarded as a second heart, presiding over the secondary portal circulation, which is the main systemic circulation. The impulses of the heart and systemic arteries do not reach beyond the diaphragm, - the distinctive mark by which one recognizes the systemic circulation. The fact that the heart and systemic arteries do not reach beyond the diaphragm is a matter of importance to the osteopathic physician.

The result of this is in many cases to cause the germs to kill themselves by the accumulation of their own secretions within the walls of the tubercle. But the germs are meanwhile undergoing a change from normal to germ life, the same change that is going on in the body by which toxins, antibodies, etc. are produced. The germs also adapt themselves to their environment, become "acclimated," (Osler) and produce secretions more and more able to antagonize the body and conservation themselves. It becomes a race between the body and the germ. If the germ wins the poison then becomes a wall of defense which, when they have become strong enough, they can literally eat up, and descend upon other tissues in force. It is then a war of nutrition - the opposition of those of the germ. But of what use are the elaborate chemical defenses of the body when a mass germinates like a weed in the toll of tubercles they cannot get at the germ? The problem is not one of manufacture, but of delivery of these chemical products. As much as the body is heavier than the germ, and more, has it the advantage in manufacturing. But the deficiency of its mechanism is not the one to be remedied by the medical man who need none. The digestive organs, already inefficient and taxed to produce normal nourishment for the body, are further taxed to produce antibodies, etc. for the germs.

The anatomical picture of tuberculosis is a very vast field. We will cover only two points here - the elasticity of the lung tissue and the wrinkling of the inner, normally shaped chest-walls.

The latter seems the simpler enough. Acquired abnormalities in the shape of the chest can no more be denied by the most implacable of the opponents of osteopathy, than can the fact that such an alteration in shape of the chest is the result of the shape of the chest cavity. Especially in tuberculosis is such an alteration common. The winged scapulae are simply evidences and results of this alteration.

What is the effect of this alteration in shape upon the contained lung?

First, an insufficient expansion, a lessening of the amount of blood-vessels, lymphatic channels, and air-cells; second, a possible wrinkling of some portion of the lung, like a muff in a long sleeve, the indication of a conformational motion of the lung and chest wall, whenever it occurs, is liable to be worked to the apices of the various lobes, especially the superior apex of the upper lobe, on account of the shape of the chest at that point, and on account of the mechanical weakness of such spaces. The site of this wrinkling would furnish an excellent site for the lodgement and development of the tubercle bacilli, and as a clinical fact, the fact of wrinkling of the lung are the parts first and most frequently affected.

The elasticity of the lung makes it also a second heart, as is the splanchic mechanism; diastole being supplied by the raising of the chest wall, acting on the blood as it acts...
THE OSTEOPATHIC PHYSICIAN

The Pennsylvania Osteopathic Law

THERE is perhaps no State in the Union where the practice of the osteopathic profession is more fully constituted by law than Pennsylvania. Indeed, the law is of such magnitude that on every occasion of judicial or legislative action, the osteopathic profession is invited to give evidence of its amenability for examination.

This, however, is not the outcome of a single movement. And let no one be deceived into the thought that all that is necessary and essential in the procuring of such a law is to demand "this and nothing else." This was not the manner in which nor by which we achieved success. To state the scheme we pursued or the line of campaign we followed that brought us victory, in an epigrammatic statement, I would put it this way: We had all opposition cornered.—To have opposed us would have been for the opposition to reverse and contradict themselves and thereby to have made themselves a spectacle of insincerity and inconsistency. As a matter of fact, the M. D.'s did again oppose us and it was this that gave us the arguments that could be worked into four legislative sessions, to accomplish this.

We took into account the character and nature of the people and the regulations of the healing art in this State, and right here I would like to interject the admonition that this is an important factor to consider. In view of the fact that these medical laws differ so greatly in different States, it is therefore quite difficult to expect to secure a uniform osteopathic law as it is not entirely unreasonable to expect that we at least somewhat conform with already existing legislation upon that subject. At all events, it always will devolve upon us to show why similar or analogous legislation should not meet our requirements and serve our purposes.

In Pennsylvania the regulation of the practice of medicine is provided for as follows:

There is a "Medical Council" and there are three State Boards of Medical Examiners, the allopathic, the homeopathic and the eclectic. The Medical Council consists of five lay members appointed by the Secretary of State and three medical members, one of whom is the Secretary of Internal Affairs, Supt. of Public Instruction and the Chairman of the State Board of Health and Charities. In addition to these are added the presidents of the three State Boards of Medical Examiners, making eight members in all. This Council prepares the examination questions from lists submitted by the several examining boards upon all subjects common to all schools. Each board then conducts its examinations of the applicants applying under it and also in its own characteristic ways and practice. The council finally reviews and passes upon all those applicants who have been returned by the several boards as having successfully passed the examinations and issues the licenses.

In 1903 we made our first effort toward securing the passage of a straight Independent Osteopathic Board Bill with an educational basis of two years of ten months each was presented and defeated at all. This Council prepared the examination questions from lists submitted by the several examining boards upon all subjects common to all schools. Each board then conducts its examinations of the applicants applying under it and also in its own characteristic ways and practice. The council finally reviews and passes upon all those applicants who have been returned by the several boards as having successfully passed the examinations and issues the licenses.

In 1905 another similar bill was introduced but it provided that the osteopathic board examination was to be held by the Medical Council in all the branches common to the medical schools without making ourselves further amenable to the medical profession by retaining the right to examine and pass upon all of its applicants eligible for licensure, etc., and upon an educational basis of two years. Governor Pennypacker vetoed the bill contending that we should place ourselves in a position relative to the Medical Council as are the medical schools and incidentally relieved himself of some ridiculous anent osteopathy betraying evidence of prejudice.

Our next bill, campaign of 1907, did place ourselves squarely under the Medical Council in accordance with the recommendations contained in Governor Pennypacker's veto message of our former bill and after a successful voyage through both branches of the legislature it was passed (in action of Governor Stuart) for the reason that the practice of osteopathy could not have been contemplated by medical legislation and therefore should have legislation of its own governing its own affairs. The M. D.'s, too, contended that the bill was opposed as it was intended for the regulation of the medical practice, a diametrical opposite position they took with Governor Pennypacker two years previously. Governor Stuart could, of course, not be held responsible for the views of his predecessor. Our duty and opportunity therefore was clear this year, as Governor Stuart would still be in office to act upon whatever bill we might succeed in passing.

Both the M. D.'s and the Governor were thus committed against the regulation of the Medical Council by or medical laws or in common with the medical practice.

The M. D.'s did attempt to again reverse themselves by endeavoring to secure the enactment of a "Single Board Medical Bill" and thereby throttle us, but their purpose in view of this past history was too apparent and we, but a handful of osteopaths against a medical host of over 11,000, not only secured the passage of our Independent Osteopathic Board Bill and Governor Stuart's approval, but also the complete annihilation of the Medical Bill and the fight was a fierce one; here appeared as many as from 500 to 700 M. D.'s at Harrisburg at a time.

The essential features of our law are as follows:

1. It provides for an Independent Board of Osteopathic Examiners consisting of five members appointed by the Governor; makes its own rules and by-laws; has power of administering oaths and issuing of subpoenas; examining all applicants and the granting of licenses.

2. It confers a license upon all graduates of reputable colleges in this State at the time of the approval of the act which license permits the licensee to practice osteopathy as taught in the reputable colleges of osteopathy,—no other restrictions.

3. Anyone in practice in some other State or States for a period of ten years and who is a graduate of a reputable college may be licensed in this State without further examination, also reciprocity with other State boards maintaining similar laws.

4. Any one in practice in some other State at the time of the passage of this act and who is a graduate of reputable college of osteopathy is eligible for examination.

5. Those in practice for a period of two years in State at the time of the approval of this act, and who are graduates of legally incorporated colleges of osteopathy

Dr. McCormack Shows Up in Kansas and Lo! A New Medical Bill Appears.

Chas. E. Hueltii, D. O., Topeka, Kans.

I SEND you a clipping which may interest our D. O.'s. There are so many of them who do not belong to the national organization and this may wake them up, at least it will show them the M. D.'s are awake.

On the 2d of this month, Dr. J. N. McCormack of Kentucky talked to the members of the House and Senate for an hour on the subjects: Why and How Good Health Should Be Made More Contagious Than Malaria.

"Dr. McCormack travels over the country talking to Legislatures and attempting to get them to appropriate money and otherwise aid their county and state health officers to put the doctors out of business. He came to the Kansas House and Senate on Monday and from here to Colorado."

You and I know what his visit means. He was at the state house and of course the legislation was in session. He made a great talk about our health. Then a bill came out of the committee room with a favorable report on it. This, too, at the close of the session and we had been told no bill of that kind would come up. It does not do us any harm, it is about as the 1901 law, except this does away with the present bill and places registration with the board of health and carries with it a salary clause of $5,000. This in face of the fact that we are crying economy all the time in Kansas. I could not get promises for our bill but we did not introduce it. Every one said, "Oh, we have too many costs now." Yet this new bill I speak of will cost about $2,000 more a year than the old one. I think we will not have to any extent of this at this time. I have not read the bill since it went to the printer but shall try to see it before it is voted on.

I think we should wake up and join the state and national organizations and have a standing legislative committee in each state. Our D. O.'s over the U. S. should try for election in the legislatures of the country, then we could keep in touch and might get on the state legislative committees. I wish they might try for it anyway.

We do so many things in our professional lines the M. D.'s don't do that it does us lots of harm and we are doing nothing but setting up laws against us. I have heard of D. O.'s who go to houses and take patients while they are using medicine.

The other day a call came to me over the phone. Upon finding that the patient was taking medicine I informed the lady that I could not treat any one who was using medicine. "Oh!" she said, "our osteopath at home would not care anything about that. This kind of position hurts us, I believe. I cannot see how we can convince people we can cure without medicine, if we are willing to treat them while they are taking it.

Osteopaths Successful as Expert Witnesses in Damage Suits.

THREE interesting damage suits have recently been called to our attention which show that osteopaths are readily recognized by the courts as qualified to act as expert witnesses. It is unusually successful as such.

Dr. A. G. Church, of Lockhart, Texas, contributes this experience:

I inclose you a clipping of a San Antonio,
Spinal Trouble. 

It is easy to discover and designate the form of these troubles in infancy, childhood and youth. Up to the age of thirty-five there is hardly a case that cannot be cured by the proper treatment. After that age, alleviation and improvement of conditions may be obtained.

We will supply the alleviation and improvement, and a permanent and painless condition. For the use of Osteopaths.

Texas, paper, which may interest D. O.'s at large.

One case of Stone vs. the Missouri, Kansas & Texas Railway Company, which resulted in a verdict of $75,000 in favor of the plaintiff in the Fifty-seventh district court was unique. Among the expert evidence was sworn to testify for the plaintiff were two osteopaths, Dr. A. G. Church, of Leechburg, and Dr. H. L. Stephens, of thin city. Chas. L. Bass, attorney for the plaintiff, says that he has never known of an osteopathic physician appearing as an expert witness in court in Beaver county before. Although the osteopaths were hampered by the defense they stood their ground with consummate skill as was evidenced by the verdict of the jury.

This case was for personal injury caused in a smash on the railroad.

The lady first had an M. D., in fact several, and then came under my care about January 12th.

I began treatment not knowing of the suit and gave the relief I could. The case ever had since she was hurt, and before I knew it they had me on the road to court.

Being the only osteopath in the case, I asked for some regular osteopath in San Antonio to give her an examination to back my diagnosis. The request was granted and I called Dr. R. L. Stephens, my friend and classmate.

We gave them, as another paper stated, an object lesson in anatomy with the spinal column, showed the lesions as found and explained how these lessons caused trouble. Attorney Charles Bass said that our testimony was the best for the case they had, from a medical standpoint.

The M. D.'s found the "tender spots," as they called them, but failed to find the cause.

Dr. Bumpus Helps to Win Case in Ohio.

Enclosed is an account of a case in which I was recently called upon to testify. This case was settled today in favor of plaintiff. I can't learn the amount of the verdict.

Lisbon, March 21. — The $75,000 damage case brought by Harry M. Wurzel of East Liverpool against the Pennsylvania company is on trial in common pleas court.

Dr. W. Bumpus, of East Liverpool, who was a passenger on the train on the night on which Wurzel was injured, was called to testify this afternoon by the prosecution. Dr. Bumpus is the first osteopath physician to give expert evidence in court here and an effort was made by the defense to exclude his testimony for the reason that he was not of the regular school

I was called to testify for the plaintiff. The court and juror. East Liverpool (Ohio) Tribune.

This was not the first time for me to testify in that court. I was called there on a similar case last summer and we won the case, too.

I was also the first D. O. to be called as an expert in the higher courts of West Virginia. It was in January, 1908, at Wheeling and we won that case also. So you see I have been called on three cases in fifteen months and we have won all of them.

There was a famous D. C.'s called by plaintiff in this last case and all wanted to let me explain the condition of the spine to the jury, as they were afraid the defense would mix them up over the physiologic details. What do you think of that for old timers? — G. W. Bumpus, D. O.

A Pennsylvania Case.

Here is a clipping that refers to a recent experience of Dr. John T. Downing, of Scranton, Pa.:

It brought out yesterday in United States Court in the trial of the case of Bert M. Millspaugh, who is suing the Erie Railroad Co., for $50,000 damages for injuries received in a wreck in the Scranton yards of the company, that he is practically living in a coffin.

To keep his spinal cord in place it is necessary to wear a wood armor.

Physicians examined him yesterday, and testimony as to his condition was given by Dr. J. J. Sullivan, an ear specialist, and Dr. John T. Downing, an osteopath. Both witnesses stated that Millspaugh is a physical wreck, with the probabilities that as he grows older his infirmities will increase. Millspaugh claims to have suffered a partial paralysis of the body (Scranton (Pa.) Truth).

Dr. Downing took a human spine with him into the court and demonstrated on it what had happened to the victim of the accident and how it would probably affect his health the rest of his days. The lawyers for the plaintiff were enthusiastic over Dr. Downing's testimony, saying it would help the medical testimony in the case and might weaken it.

Spinal Deflections, Curvatures and Deformities. Send for our descriptive and illustrated literature and let me explain our plan of cooperation.

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Anatomical and Physiological Pictures of Diseases. Tuberousitis.

(Continued from page 2.)

upon air, and by the pressure of the blood from the heart being the action of the elastic fibres in the lung tissue, as well as of the expiratory muscles. The chest walls being sustained by the elasic tissue is lost, the systole semi-permanent. This, of course, lowers blood pressure, and impedes circulation; by impeding the work of the right heart it impedes also the left heart.

Such a collapse of the lung may be assumed to have a depressing effect on the vaso-motor mechanism, of which it is so large a part, and in that way to produce a further vicious cycle-contraction of chest, depression of circulation and vaso-motor action of stimulus for action of respiratory muscles, further shrinkage of chest, etc. This lessening of the chest cavity is not always primary, but complicates the majority of cases.

Among the causes which may lead to this abnormality of the vaso-motor system are any which strongly affect the vaso-motor mechanism. Any such influence may become an abuse. Among these is tuberculosis, and it is said to be exceedingly rare,* while they are engaged in active singing, but the condition reverses itself with an alarming suddenness and pursues some sedentary occupation. This may be explained in this way: That the vigorous compression of the abdomen in the act of singing is attended with a depression of the heart, and that of the body is left unduly contracted, as necessary to counterbalance the too-vigorous abdominal compression. The nerve centres governing the circulation, having had abnormal elements injected into them to meet the requirements—elements normal, of course, to those requirements but abnormal from every other point of view, are now left with the abnormal dominant. They continue to act in concert with the body, and their structures, producing that amount of force which was before necessary but is now not only unnecessary but dangerous. Of course, in time nature will re-adjust herself, but the interval is the opportunity for the ubiquitous Bacillus Tuberculosis.

The phenomena is exactly similar to that which produces typhoid fever in men trained as athletes who suddenly leave off athletic training. Nature continues to produce the same amount of combustible material as before; but this not being used in the normal way passes through an abnormal katabolism and overpowers the body with toxines.

These statements with regard to tuberculosis hold to be self-evident: that those conditions produced by the germs, by means of which they become lodged in the body, should be produced in the body by other means, would constitute a predisposition to tuberculosis:

That since one condition produced by the germs which is necessary for their successful lodging in the tissues is impairment of circulation and nerve force, therefore a pre-existing impairment of circulation and nerve force would constitute a predisposition.

That since another condition which is produced by the germ upon which it relies to become lodged, is the penetrability of the membrane lining the cells, therefore a weakness of nutrition, nerve force, or blood pressure having a weakening effect upon the cell membranes would constitute a predisposition to the disease.

There are thus two different magnitudes to use the words of Le Dantic,* of the predisposition to tuberculosi. First, the physiologica1 and anatomical, which were considered in the preceding part of the article, and second, the biological. The first concerns the entering of the system as a whole by the germs, and the war upon them by the whole organism; the second concerns the battle between individual cells and the germs.

In this latter battle, the elements are first of all the cell membrane; also the toxine of the germ, the antitoxine of the cell, and the nutritional vigor of the cell, dependent upon the vigor of circulation and nerve supply.

Professor Jaques Loeb states that between any two albuminous substances a membrane of precipitation is formed at the plane of contact, which membrane is specific for both substances. Such a membrane is the membrane between the cell and the lymph, and all external things; such a membrane is that between nucleus and cell protoplasm, and that around the chromatids; the membrane between all organs and all different structures, or basement membranes, are no doubt developments of the same nature.

The germs and poison-line and the penetration of germs will have reference to this membrane of precipitation, for all influences and penetrate it before reaching the vital elements of the cell—in fact, before having any relation whatever with the cell.

Of this cell wall, the most important element is fat. "The cell wall is of fatty substance, and substance soluble in fat enter. All narcotics are soluble in fat." (Overton.)

The importance of fat metabolism in tuberculosis is abundantly evident in this fact. Tuberculosis is indeed regarded as primarily a disease of fat metabolism. Dr. Still called attention to the starved condition of the organism as of great importance in tuberculosis. The latest medical treatment advocated for tuberculosis is the injection of dog fat. The fat of the dog is nature's provision for the animal against poisoning, particularly against snake poisoning, and makes the organism of the animal. The value of the homely fat meat is well established practice paying between $5,000 and $6,000 per year, is obliged to leave the city on account of the ill health of his wife.

The doctor who has built up this practice has had seven years experience and is prepared to give full references as to his character and professional standing. He wants to introduce a good D. O. to his patients.

This practice presents an excellent opportunity for two D. O.'s, man and woman. There is a nice family practice at the home and good office practice downtown.

The terms will be made very favorable to the right buyer. Complete references as to character and ability wanted.

To a person with proper qualifications this is an unusual chance to acquire a splendid practice under circumstances that will secure the immediate confidence of the connection.

*Felix Le Dantic.

**My sole authority for this statement is a very excellent young Dr., Mr. Arnhelt, who has spent many years in Germany and other countries, and has an excellent opportunity for observing such cases.

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All conditions in connection with this practice are very satisfactory, and it is offered for sale only because of the imperative necessity of change of climate.

The doctor who has built up this practice has had seven years experience and is prepared to give full references as to his character and professional standing. He wants to introduce a good D. O. to his patients.

This practice presents an excellent opportunity for two D. O.'s, man and woman. There is a nice family practice at the home and good office practice downtown.

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preparation of the fat is of importance but this the final step would appear to be the most important. The germ, in obtaining lodgement, certainly depends upon its power to penetrate the cell wall. A weakness of the membrane therefore would constitute a predisposition to tuberculosis; weakness of nerve action, with consequent weakness of circulation and cell nutrition, would lead directly to weakness in this cell membrane. Thus the anatomical physiological and biological pictures become one.

Not alone the cell membrane is concerned in the battle between body cell and germ, but the whole cell and its nutritive strength.

All nutritious substances must be in such accord with the nature of the protoplasm within as not to increase the membrane of precipitation, and all poisons must be such substances as do penetrate or break down the membrane. This produced excess is specific to what is the produced substance but an opsonin. In case the combination of the external substance and the produced substance is not nutritious to the cells, its destiny is to be taken up by the white blood cells; and this produced substance is the opsonin which makes it edible by this white cell. The word opsonin is applied only to the substance as it acts specifically on microorganisms, but its principle is the same whether in germs or other substances.

Biologic knowledge is already at such a stage that a very much more specific study of this battle is possible; but the etiologic relations are sufficiently indicated here, and the limitations of this paper do not permit of deeper study of the matter.

Clinically, in osteopathic practice, lesions of the fourth or fifth ribs are the most frequent lesions. At the International Tuberculosis Exhibit in New York recently, a careful examination of the X-ray pictures of tuberculous subjects was made; and in practically every one of them lesions of the fourth and other ribs was clearly discernible; in one case, a lateral deviation of the body of the fourth dorsal vertebra was clearly seen. It is impossible with our present osteopathic knowledge to trace the connection between these lesions, and their effect more accurately than to say that they are in such a position that they might affect all of the factors in the disease. If we are to be permitted to study physiology from pathology, then these almost constant lesions are to be taken as evidence that the ganglia of the sympathetic nerves lying on the fourth and fifth ribs are concerned particularly in fat metabolism and in general digestion, and nerve integrity.

Nebraska Wins Independent Board

IT IS with great satisfaction that we of Nebraska can announce to the profession throughout our land, that we have succeeded in passing a first class independent board bill in this state. Early in the campaign there existed in the minds of a few of the practitioners the thought that an independent law was undesirable; but when these individuals were made familiar with the fact that the medical examiners of the state were granting osteopathic examinations to chiropractors, magnetic healers, and neuropaths, none of which had complied with osteopathic statutes, the sentiment for independence became unanimous, all working splendidly for one common cause, an Independent Osteopathic Examining Board.

Good work was done by a great number of the profession throughout the state. A publicity bureau was maintained, keeping the entire profession familiar with every step during the campaign. This resulted in splendid cooperation by a goodly share of the members of the profession. We will avoid mentioning names of any one in the state, but are compelled to name the man from outside of the state who devoted about one month of his time to our cause without remuneration, because of his loyalty to the cause of osteopathy. This man is Dr. T. L. Holme, formerly of the firm of Holme & Hurst, of St. Joseph, Mo. Dr. Holme is entitled to the gratitude that will be felt by the members of the profession when they become familiar with the facts of his unselfish devotion to our cause, and the writer particularly wishes to express his sincere thanks.
THE OSTEOPATHIC PHYSICIAN


In reply to Dr. Hildreth's question, I read Dr. Moore's article "Read, Think and Act," yes and I read his article too. Those two articles should make up the Associated Colleges as well as the A. O. A. for the two have certainly been asleep a long time, since birth as far as I am able to learn. If they had not they too would have been with the osteopaths in securing legislation as was and is the A. M. A. and Am. Association of Medical Colleges. The writer was one of five (Drs. F. L. Montgomery, J. Clinton McFadden, F. W. Winter, C. M. Maxey and W. T. Thomas) composing the Osteopathic Legislative Committee of Washington state this year and the only help we got was a few catalogs of some of the schools and advice from A. O. A. to go down in defeat rather than accept anything but an independent board. That sounds all right to the fellow who is hundreds of miles away from the field of action and who has a license, but to the one who has no license to practice and to whom defeat means a "game of checkers" and his license, it's different.

The Washington Osteopathic Society appointed its Legislative Committee and we met November 10, 1908, the first time, we began a correspondence with a number of our best informed D. O.'s to come out and help us—that we could pay some money for help; but all with one exception, said "can't come."

We employed the one and at the final he said business was so changed that he could not take a seat with us but a limited time, so we were left to help except what the committee and two other D. O.'s did.

We introduced an independent board bill on January 29th and on January 27th the M. D.'s introduced a composite board bill, giving two D. O.'s a place. After much work on part of all they came to us and agreed to make such changes as we suggested, so we joined with them and the composite bill passed the House 79 to 11 February 18th, and was immediately transferred to the Senate, which it passed by 36 to 4 on March 8th.

We realize it will be harder for new people to come in here and will work against the schools but they too must help look after their own interests. They must not leave it all to the "You are a game of checkers."

I hope I have not taken too much space but if I can put a little life all along the line I am satisfied.

What the Washington Law Requires. It will no doubt interest osteopaths to know that in Washington have at last won recognition. Our law was patterned after that of California. We have two osteopaths on the medical board, composed as follows: Five allopaths, two homeopaths and two osteopaths. The latter must be graduates of Osteopathic colleges.

To receive a license one must be practicing in the state upon the passage of the act, and a graduate of a school requiring actual attendance of two years of ten months each; or (b) have been in practice continuously in one locality for the past two years. After 1909 a three year course is required.

The fee is $25 for registration now and $25 hereafter. The bill carried an emergency clause and so goes into effect at once.

The examination is upon the following subjects, no question of which shall relate to treatment: Anatomy, Physiology, Bacteriology, Pathology, Histology, Chemistry and Toxicology, General Diagnosis and Hygiene, Gynecology and Obstetrics.

The same for all applicants.—J. Clinton McFadden, D. O.
THE OSTEOPATHIC PHYSICIAN

The Organ of News and Opinion for the Profession.

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Fairness! Freedom! Fearlessness!

EDITORIAL

"How to the line, let choke fall where told"

X-RAYS ARE DEADLY TO OSTEOPATHY.

D. H. CLYDE SNOOK, of Philadelphia, an expert in X-Radiation, was recently quoted in the Associated Press as saying that repeated use of X-Rays produces artificial old age and many other things a great deal worse. He said:

"The danger in the Roentgen ray work is to the operator and not to the patient, since the patient is exposed to the ray only a short time, while the operator is daily subjected to large amounts of the radiation. Many of the older Roentgen experts have been martyrs to science—some have actually given up their lives, the number at the present time being three. I believe the Old Man at 40."

"Many others have shortened their lives; some of them are old men at 40. Their general nutrition has been greatly impaired and their vitality lessened. Just how this is brought about the physicians do not know; but that it is true they will admit to you."

"The hands of most Roentgen experts look like those of old men. The skin becomes reddened and with sensitivity of the skin at the points of contact of the rays. Nodules appear near the joints. The rays break down the tissues and kill the skin, so that they degenerate."

"Large, massive doses, directly localized, often produce a falling out of the hair, but the hair usually returns in greater abundance."

"It is no longer necessary to burn a patient in securing an X-ray photograph. All of the experts have who have been received their burns from experiments performed some years ago."

At the beginning the Roentgen rays were used only in detecting foreign substances in the body, but today they are utilized in the diagnosis of fractures, in abdominal diagnosis of cancer, detecting obstructions of different kinds and in cases of malformation and displacement of the abdominal organs."

HERBST BILL MADE HARMLESS OPERATORS.

In the Pennsylvania Senate April 7th the Herbst Medical Bill was again subjected to the Herbst Medical Bill. With the adoption of the amendment offered by Senator Langlitt, of Allegheny, that "nothing contained in this act shall be construed as affecting the practice of osteopathy" the whole bill was held up. The bold attempt of the M. D.'s of Pennsylvania to kill out osteopathy in the state was rendered void. The D. O.'s of the state are to be congratulated on the splendid fight they made and the strength and influence they were able to exert among the people.

Let Us Have Complete Statistics on the Insurance Companies.

REFERRING to our request in The O. P. last month for a list of insurance companies, fraternal and old line, who do or do not accept osteopathic examiners, Dr. A. K. S. Calvert, of Topeka, Kansas, sends us the name of the "Knights and Ladies of Security," of Topeka, Kan., as one of those who refuse to recognize osteopaths. Dr. Calvert sends copies of correspondence with Dr. E. S. Pettyjohn, medical director of the society, which in itself shows the need of united effort in this matter. The following is a letter addressed to the secretary of a local council, Mr. Jno. T. Noland, of Ponca City:

Dear Sir and Brother—Replying to your inquiry regarding the appointment of an osteopath as medical examiner, I will say that it is not my intention to do so unless circumstances in my office make it necessary. I have corresponded with the secretary of the State Board of Health, where that seat or seat in medicine originated, and found that the Knights and Ladies of Security have been recognized as practitioners of medicine. Our law requires me to the fullest extent possible to keep up our standard of medical practice in the profession.

Yours sincerely and fraternal,
E. S. Pettyjohn, M. D.


In another letter he says: "The American School of Osteopathy is not a medical college at all, and osteopathy is not a school of medicine. These kind of letters and the position taken by many insurance companies is harmful to osteopathy. Bring the influence of your friends and patients to bear on the directors of these various organizations and force them to recognize your right to sign examination certificates. Here is the start of the list of "those who do" and "those who do not." Let us have more..."

Insurance Companies Accepting Osteopathic Examiners.


Fraternal Bankers Reserve. of Cedar Rapids, Ia. Reported by Dr. F. S. Pettyjohn, D. O., medical director. Fraternal Brotherhood of America, of Mason City, Ia., reported by Dr. I. E. Hancock, of Independence, Kan.

Insurance Companies Refusing Osteopathic Examiners.

Knights and Ladies of Security, of Topeka, Kan. Reported by Dr. A. K. S. Calvert, of Ponca City, Okla., with whom are those who refuse to recognize osteopaths."

Modern Brotherhood Renews.

I wish to inform you that after being duly elected by the Modern Brotherhood of America Lodge at this place as their examiner and being accepted at the head office, and my commission sent to me, it has been recalled on the ground that I am an osteopath, which fact they knew beforehand, of course, and stating that the order does not accept osteopaths as examiners. However, this mistake evidently had not been discovered before the medics began to make vigorous protest against me. The members of the lodge are very bitter against this treacherous action on the part of the head office—Sten Hanson, D. O., Pargo, N. D.

Dr. Paul, of "Homesteaders," Explains Position.

In a letter to Dr. Paul, of "Homesteaders," Dr. E. S. Pettyjohn, D. O., medical director, received the following letter from Dr. C. B. Paul, of "The Homesteaders." It seems to be up to some Iowa friend of osteopathy to make a test case of the matter: "Some one has kindly forwarded me a clipping from the "Osteopathic Journal" which is written by Dr. Ivy E. Hancock, and is entitled 'What is "Homesteaders'"? It would be to have the address of Dr. Han­nock, if you will kindly give it to me, that I might write to them. I think we are well satisfied that I have done enough to secure my friends as osteopaths as examiners. I do not want to jeopardize the right of The Homesteaders to do business in the state of Iowa by violating the laws, but, interpreting by the attorney-general the right of the state, as undoubtedly the Modern Broth­ erhood of America, of the state, as undoubtedly the Modern Broth­ erhood of America, of the state and the Fraternal Bankers' Reserve, and others are doing. I would like to use my best efforts to bring the matter before the legislature of this state and report the Knighthood and other more important matters at the present time in a fight for recognition as examiners for insurance organiza­tions. I believe that if some osteopathy were to bring suit in court, on his own hook, irrespective of the fraternity of osteopaths, that the attorney-general's ruling would not stand. It looks to me to be arbitrary and without suf­ ficient foundation. If you, doctor, or any of your osteopath friend want to take the matter up, I will give you what information I can, including the very important matter of what is the right of The Homesteaders to do business in the state of Iowa by violating the laws, but, interpreting by the attorney-general..."
THE OSTEOPATHIC PHYSICIAN

A Legislative Experience—How Our Fight Was Won in Nebraska

T. L. Holme, D. O., Holdow, Mo.

I WENT to the Nebraska legislature on February 23rd to hear what was to be done about the osteopathic bill, Senate File 18. At this time it had passed the Senate unanimously and was in the Medical Committee. One of the friends who had tried to kill it was holding it up for three weeks without reporting it. Four M. D.'s and ten D. O.'s were then members of the Medical Board of the House. M. D. was the most insulating man I ever saw. He talked twice every time any one else said a word, and finally the committee told us to leave the room and they would decide the case, and he talked three times after that.

As we walked downtown Dr. Atzen remarked: "If we had a man to stay here and work for our bill it might get through." I offered him my services, which he accepted. I went to the next day and registered as a lobbyist for osteopathy. I thought I had better talk to one man at a time, so if my friends would hear me.

It was late in the evening and most of them had left the House. I spoke to one gentleman and asked him to urge Senate File 18, the Osteopathic Bill. He looked the bill over and argued it almost out of existence, and asked me all the questions he could think of, more than I could answer. This was the best thing that could have happened. I was ready for the next man, and when he asked me a question I would answer him by asking him one and in this way I found what our opposition would be so that I could positively answer. I did not talk to any more; those that were friendly I asked inquiring for me how other men stood, and if they were not friendly I would not make myself known to them. In this way I did not lose any time or arouse any of my enemies.

In ten days I had seen forty-seven men; forty-three were good friends and told me we would have no opposition. I told them I knew we would.

In another ten days I had seen thirty-five more men; in all, sixty-seven had promised to support the bill, and eight had promised to speak for it. Our friends told me that we were safe, as there was no other bill of the kind.

The last night to introduce bills the M. D.'s placed House Roll No. 499 on record; a bill to provide for a new medical board to be appointed by the Governor and three weeks later they amended it to include an osteopath. Several of our friends came to me and told me liberal the M. D.'s were to put one of us on the Board and they thought the best we could do would be to drop our bill.

I reported at once to our Legislative Committee, in Lincoln. They phoned Dr. Atzen, at Omaha, and the next day I went back to the House with instructions to ask for a separate board. He went to our best friends and told them what we wanted and did not say anything to the others for fear of a division of our friends.

Our bill now stood number seventy. If they had gone on for four days longer we would have come out all right. The Sifting Committee of fifteen men was appointed and everything went into it, with 348 bills to select from. I called on Dr. W. L. Davis and Dr. C. B. Atzen to come down, as I thought I had done all that I could.

We spent most of the next day formulating answers to the objections to our bill, so that I could hand them around to our friends on short notice, if our bill ever came out of the Sifting Committee. Dr. Atzen said: "Holme, stay with it; die in the last ditch.

The next day I tried to get some one of our eight friends, in the Sifting Committee, to get our bill out. One said: "Your bill is out. House Roll No. 499 is for the D. O.'s and that is enough." And to my astonishment there it was on the Board. Three of our best friends and they said it was hopeless.

Just before they went into session the next day at noon I talked to Representative Wilson and told him they were going to kill Senate File No. 18 and advance House Roll 499. He said they could not do it. Just then the House came to order and I had to get off the floor. One of our friends made a motion to kill every bill in the Sifting Committee of similar nature. Four M. D.'s voted yes, but Wilson was on his feet in a second and made a talk against the motion and killed it, and before anybody had time to say a word he went on about the injustice it was for the House to advance a House Roll ahead of a Senate File; he did not say a word about osteopathy until he had the attention of everyone in the House. Then he said Senate File No. 18 should be considered with House Roll No. 499, as they were both for osteopathy.

The M. D.'s jumped to their feet, but it was too late; our friends voted it out of the Sifting Committee, so all the D. O.'s in town, but only reached Dr. Davis. The M. D.'s were using the phone, too. In about an hour three or four of our friends came in and I found they were all M. D.'s.

The medics now became desperate. They told two or three of our best friends who were in the Sifting Committee I had been down in the wrong bill that they would kill their bills if they voted for the osteopathic bill or said anything in favor of it. They made similar threats to nearly all of our friends. A Mr. S. walked out of the chamber and stood outside the door and said he would not vote for it, and if wanted would come in and vote for our bill.

As an illustration of the tactics one has to look out for, a representative came to me and said: "I have a petition with 118 names and twenty personal letters asking me to vote for the osteopathic bill. Three M. D.'s have asked me to vote against it, but I am going to vote for Dr. Pills. What will you give me to vote for your bill?" He was hoping I would make the mistake of offering him a cigar, or if I had done so would have had me arrested.

Mr. Wilson told the M. D.'s there was no strong opposition and I should go ahead and vote as he pleased. He made a telling speech that won several votes for us. A quotation from the American Medical Journal that "the only way to kill osteopaths was to put one on the Board and then ignore him" was very effective.

In spite of strenuous opposition, a movement to amend the House Bill No. 499 by taking the osteopathic off the Board was carried. Representative Hefferman said osteopathy had saved his life. Representative Scheele and Shoemaker also spoke for it, the latter displaying a handful of letters which he said were from business people who were in favor of the osteopathic bill.

The bill passed with a slight amendment, 64 to 16, to put it into the House. Our friends then said: "Let us have a fight, but the Senate put it through in a hurry before anyone had time to object." March 30th go the House to the Senate and the bill and it will become a law July 1st.

The Pennsylvania Law.

(Continued from page 1.)

(though not reputable) may register in the office of the prothonotary of the county in which such a one may wish to practice, but is not to be licensed nor allowed the privileges of a physician, as for instance, signing birth and death certificates, etc. (This concession we found necessary to make to the quacks.)

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THE OSTEOPATHIC PHYSICIAN

In D. O. Land

North Dakota Gets Board of Examiners.

March 20th Governor Burke of North Dakota signed the measure regulating the practice of osteopathy and creating a state board of examiners.

Good Attendance at New York Meeting.

Dr. Walter W. Steele, of Buffalo, was the guest of honor at the March meeting of the Osteopathic Society of New York. His address was skillfully conducted by Dr. Joseph Ferguson. Steele was a subject that has been seldom touched upon in our osteopathic bodies, but the increased responsibilities attendant upon the practice of osteopathy as a profession, made this line of discussion so interesting and instructive, makes this line of thought much more vital.

Dr. Ferguson's address was well received by the National Red Cross for some time past has well fitted him for the work and his discussion of the subject from the classification of wounds and fractures to the temporary and permanent dressings of all emergency injuries was ably presented.—Guy Wendell Burns, D. B. P., President.

Missouri Osteopathic Association Convention.

The annual convention of the Missouri Osteopathic Association was held in Kirksville, last Thursday, Friday and Saturday of May, at the A. S. O. The meeting will be held just at the close of the College session, thereby giving the student body the privilege of attending either the convention or College sessions. Unction will be given to the interest of this convention to make it the best in the history of osteopathy.

Among the speakers will be Drs. J. W. Conn, J. W. Hofheinz, Wm. Smith, H. D. Bailey, G. M. Laughlin, George Still, R. E. Hamilton, Emma Cooper, J. P. Shinkleford, F. P. Pratt, A. B. King, Franklin Flske, W. D. Dobson, Wm. C. Thompson, C. J. M. Jones, F. Goetz. Others will be added in a short time. Every osteopath in the state should be getting ready for his convention clothes that he may not miss the West. The committee is well organized into districts. The centers are Kirksville, St. Louis, Kansas City and Springfield. This is a splendid opportunity to split the district can send in the largest delegation and which one can have the greatest percentage of members of the M. O. A. This will be a good chance to show your loyalty to the science and profession which is earning your salt and pepper. Get a little ginger mixed in. Get out of your old apathetic shell. Let every one "line up" for a glorious march upon the home of our beloved founder, Dr. Andrew Taylor Still. Remember the time and the place, Kirksville, Mo., the last of May.—Frank F. Walker, D. O., Pres. M. O. A., St. Joseph, Mo.

Pittsburg D. O.'s Well Establish Clinic.

A free osteopathic dispensary is to be established in Pittsburg by the Osteopathic Society of Kelly County. A committee consisting of Dr. W. S. Lawrence, of Braddock, and Dr. E. R. Hansen and Dr. T. L. Goehr, of Pittsburg, was selected at the meeting of the society to report to the members on March 12th to secure headquarters for the dispensary. It will be carried on as soon as plans for the operation of the institution can be formulated.

The annual election of officers was also held with the following result: Dr. Harry M. Goehr, president; Dr. Emma Compton, vice president; Dr. G. W. Tebbets, secretary; Dr. H. J. Dorrance, treasurer.—Pittsburg (P.) Leader.

The Osteopathic College and Infirmary of Osteopathy.

CHE prospective student of Osteopathy wants to look about him carefully before choosing his school.

Philadelphia is the center of American medicine. The first American medical school was established there. It is the work-shop where Leidy, Gross, Agnew, Pepper, Pier, Spiller, Ossler and a hundred more set the standard for American practice and American teaching.

This is the environment of the Philadelphia College and Infirmary of Osteopathy, established in 1899 and since enlarged four times to accommodate the increased attendance.

The Philadelphia College draws clinical material from a population of fifteen hundred thousand.

It has acquired the unique dissection facilities of the Philadelphia College of Anatomy.

It has access to all the famous clinics of Philadelphia, and to the unique collections of the Wistar Institute of Anatomy and the Academy of Natural Sciences.

And its Faculty enlists the teaching services of some of the foremost practicing osteopaths in the country.

Students from every part of the United States and from foreign countries, seek the Philadelphia College of Osteopathy.

Next class matriculates September 14, 1909.

Write to the Registrar for catalogue of the Philadelphia College and Infirmary of Osteopathy, and a copy of the Journal.

1715 North Broad Street
PHILADELPHIA, PA.
Those desiring particulars should address Rev. Castle or John J. Hunter.

Ohio's "Richest Man" Friend of Osteopathy. Ohio's richest man yesterday left his office and went to the state house to appear before a committee of the lower house of the Ohio legislature—not to ask for or oppose legislation that would affect his business—but to join with Representative Charlie Miller in making a plea for a square deal for osteopaths.—Des Moines (Ia.) Register and Leader.

Washington State Meeting.

The Washington State Osteopathic Association met at Butler Annex, Seattle, April 3. Officers elected were: President, Dr. C. J. McFadden, Seattle; first vice-president, T. D. Morris, Spokane; second vice-president, L. C. Walker, Ellensburg, secretary, W. T. Thomas, Tacoma; treasurer, H. J. West, by Seattle. D. M. Quill, of Tacoma, was elected as toastmaster at the dinner in the evening. The program included: "The Osteopath as a Physician," Dr. W. J. Ford, Seattle; "The Osteopath as a General Practioner," Dr. J. W. Murphy, Ledro Wood; "The Osteopath as a Health Officer," Dr. C. K. Potter, Seattle. Forty new members were voted in. About sixty were present.—Robert W. Winer Ford, D. O.

Missouri Valley Meeting.

The inspiration of the memorable convention of last August still being felt, we count on marked success for the next Kirksville Convention 27th, 28th and 29th of May. The joint meeting of the M. O. A. and the M. V. O. A. insures a large attendance. Each organization will present a varied and interesting program. The consideration and revision of the constitution of the M. O. A. makes it possible that we have the attendance of every osteopath in the state who is interested in the welfare of his profession. To add to the festiveness of the occasion, we shall have music provided by the orchestra and glee clubs of the A. S. O. —Bertha A. Buddeke, D. O., Recy.

Colorado Bill Lost in Lower House.

The cause of the separate board was defeated by three votes in the lower house of the Colorado legislature, though the outlook had been most encouraging, even up to third reading. The measure had unanimous support in the senate. The reasons for this defeat are not yet clear, and I ask all to withhold judgment till every person seemingly blameworthy shall have been fully heard.—N. Alden Hollee, D. O., Denver.

Active Opposition in Rhode Island.

The M. D.'s of Rhode Island have set up an organized fight on the osteopathic independent board bill. A petition was sent to the Legislature and signed by a "protest" is being sent and signed to the committee having the bill in charge. Our D. Os have made a good showing and it is expected the bill will be reported out some time this week.

Quick Work on Los Angeles College New Building.

You will be glad to know that we have the first story of a four-story, and basement addition to our present college building already up. The new building will be of the same size as the present one, the only difference between the two being that we have five stories in our present building. The two will be united, separated by a court. This will practically double our present building and will give us enough room for several years' growth. We will have in the new building forty more treating rooms, an assembly hall seating 500, a modern surgical amphitheater seating 150 to 175, with ample wash and private rooms to care for a large surgical clinic. Our building will be served with an elevator from the Hill-street entrance. It is not possible to tell you exactly how nice we are equipped and how well our buildings are planned for college purposes. I hope some day to have the pleasure of taking you through the buildings, when you will realize that we have the most modern buildings and equipments that can be obtained.—Harry W. Forbes, D. O., Los Angeles, Calif.

Hold Banquet as Celebration.

The Southwest Missouri and Southeast Kansas Osteopathic Association had its first birthday March 27th and the event was celebrated by a banquet at the Hotel Conrad, Joplin, Mo. Officers were elected: President, Dr. Charles E. Willis, Pittsburg, Kan.; vice-president, Dr. L. D. Baen, Joplin, Mo.; secretary-treasurer, Dr. M. H. Kenaga, Joplin, Mo.

Fifth District Illinois.

The Fifth District Illinois Osteopathic Association held its annual meeting March 27th and elected the following officers: President, Dr. J. Nowlin, Alton, Illinois; vice-president, Dr. A. S. Oster, Alton, Tuscola; secretary-treasurer, Dr. F. A. Parker, Champaign. A committee, consisting of

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Next Class Will Begin September 15th, 1909

American School of Osteopathy

KIRKSVILLE, MISSOURI

THE OSTEOPATHIC PHYSICIAN

Drs. Nellie B. Scott, William S. Hartford and J. A. Overton, was appointed to arrange for a spring meeting or reunion of the osteopaths of southeastern Illinois. No date was fixed.

Maine Osteopaths Talk Conventions.
The Maine Osteopathic Association held a meeting in the offices of Dr. Mary W. Day, at 230 Newbury St., Boston, on March 26th. Arrangements were made for the New England convention, which will be held in Portland, May 30th. The annual state convention was also taken up and the month of June decided upon, although the exact date was left to be fixed later. It will also be held in Portland. Dr. Florence A. Covey, of Portland, gave a paper on "Osteopathic Physiology."

Third District Illinois.
The Third District Illinois Osteopathic Association held its regular semi-monthly meeting March 30th at Galena. The program included: "Osteopathy in Acute Diseases and Emergency Care," Dr. Ellis and Ellis, Canton, Ohio; "Differential Diagnosis in Skin Diseases," Dr. Minnie M. Haymiller, Abingdon; "Mental Injuries," Dr. A. Freeman, Cambridge; "Hygiene and Sanitation, Personal and Public," Dr. Barker, La Harpe.

Central Kentucky Meeting.
The Central Kentucky Osteopathic Society held its annual convention March 29th at Cynthiana. There was a good attendance.

Undoubtedly True.
In a letter commenting on the fight for an independent board in North Dakota, Dr. C. E. Sanders, of Grand Forks, says: "One great point that was firmly impressed on my mind was the want of knowledge of the people generally, of what osteopathy is. What the osteopaths of the United States have got to do is to inaugurate a campaign of education." Osteopathic Health has been doing efficient work along this line for many years. Its usefulness can be increased by the profession just in proportion to the extent to which they circulate it in various communities.

Opening at Savanna, Ill.
Drs. Barker & Barker, who have removed to Eureka, Ill., report that there is a good opening for a gentleman osteopath at Savanna, Ill. For information address Mrs. J. R. Connell.

Claims "New System" of Nerves.
At a meeting of the joint committee on public health of the Wisconsin legislature, held March 24th, B. J. Palmer, of Davenport, Iowa, the chiropractic "fountain head," made the claim that his science was based on the discovery of a "new system of nerves" and offered to rent the opera house and demonstrate before the faculty of the state university and the medical profession this new "nervadoctrine." Palmer said he had to "catch a train." The osteopaths and acupuncturists, on the other hand, have used the same method of demonstration. The result was that Dr. Palmer did not seem to have enough "nerve" to carry it through, as the newspapers reported that when Dr. A. M. Morris, of La Crosse, asked him if he would meet him in open debate, Palmer said he had to "catch a train." The osteopaths of the state are not opposing the chiropractors, as such, but they demand that they take the same course of study and pass the same examination as osteopaths before being granted a license.

A. O. A. Program in the Making.
A special committee consisting of Dr. Ada A. Achorn, chairman, Dr. Ella D. Still and Dr. M. E. Clark has been appointed to take charge of the program of the section in gynecology and obstetrics at the Twin-Cities meeting of the A. O. A. Have you any suggestions as to subjects to be considered? Do you know of any osteopath who is doing any especially successful work in this line? If so, please communicate at once, as the time is short.—Ada A. Achorn, D. O., 175 Huntington Ave., Boston, Mass.

Osteopathy Given Prominent Place.
The Wilbur (Wash.) Register recently showed on its front page a half-tone of the A. O. A. buildings and gave a brief review of the growth of osteopathy.

Ontario Association Semi-Annual Meeting.
The eighth semi-annual meeting of the Ontario Association of Osteopathy was held April 12th at Hamilton. An address of welcome was delivered by Mayor McLaren of Hamilton and a dinner was enjoyed. The proceedings included: "Politics of the Profession of Osteopathy," by Hugh L. Russell, Buffalo, N. Y.; "Things That Help and Things That Hinder the Progress of our Science," by A. S. Gordon, Walmsley, Peterborough; "Costal Lesions," by Dr. H. L. Russell, Buffalo, N. Y.; "Osteopathy in Diseases of the Heart," by Geo. W. Lewis, Hamilton; "Prophylaxis," Dr. W. O. Lewis, Hamilton; "Sacro-Ille Lesions," by Dr. F. J. A. O. A. Have you any suggestions as to subjects to be considered? Do you know of any osteopath who is doing any especially successful work in this line? If so, please communicate at once, as the time is short.—Ada A. Achorn, D. O., 175 Huntington Ave., Boston, Mass.

American School of Osteopathy

Kirkville, Missouri

Cash for Good Articles

1. "Osteopathic Health" will pay cash for acceptable articles illustrative of osteopathic theory and practice, written so the lay reader can understand them.

2. Short articles are preferable—from 300 to 1,200 words being the desired length.

3. Articles about any one of the more common diseases are preferable to talks about general theories.

4. Practitioners are requested to write just what they believe a successful field journal should have in its pages.

5. Articles not available will be returned. Every article subject to such revision as the judgment of the editor deems advisable.

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EDITOR
171 Washington St., CHICAGO

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California Annual Meeting.

The California Osteopathic Association will hold its thirty-third annual meeting at the Hotel Santa Barbara, Pismo Beach, March 27th, 28th and 29th.—Effie E. York, D. O., Secretary.

Utah State Meeting.

The annual meeting of the Utah State Osteopathic Association was held March 17th at the Odd Fellows Hall, Utica, and was well attended.

The program included: Annual address, Dr. J. C. Woodmansee, "Osteopathy in Gynecology," and Dr. J. P. Lyon, "The Human Body and How to Use It."—Ralph Kendrick Smith, D.O., Boston, Mass.

Chicago Association Meeting.

The regular monthly meeting of the Chicago Osteopathic Association was held April 1st at 57 West Washington Street. The program was short but included an address by Dr. Chas. A. Wolfe, "The Rights of Osteopaths Are at Stake."—Dr. William J. Haynes, Sec. Pro. tern. 

Iowa County Hospital Closed to D. O.'s.

Notwithstanding the splendid fight made by Representative Charlie Miller, the amendment to the Civil Service Law permitting osteopaths to use the institutions was voted down. The osteopaths rallied and their strength is being given serious consideration. We expect this recognition of the rights of osteopaths.

The Legislative Situation in Maine.

Relative to the legislative situation in Maine, I regret to inform you that the committee on public instruction did not undertake to draw. As the legislature of Maine meets only every two years, this ends the contest in that state until 1911. The members of the committee personally expressed themselves as very favorably impressed at the hearing and several of them promised positively to bring in a favorable report or at least a minority report. The reason is that there are only sixteen osteopaths in Maine and these residents are very vocal; the power of the entire medical profession of the state is able to bring sufficient weight to bear to crush any opposition. Osteopathic, comparatively small number of osteopaths, but the osteopathic profession in Maine are very courageous and this enthusiastic and has decided to begin immediate action and build up a legal status as practitioners.—Philadelphia (Pa.) Ledger.

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change which I have considered much needed for a good while."—Dr. R. E. Tuttle, Hecks ville, Ohio, December, 1908.

"The January issue is very neat and the type and paper better. The shape permits of slipping into the pockets without folding."—Dr. M. H. Cooper, Pontiac, Mich., January 29, '09.

"The new 'O. H.' is a great improvement over the old both in its dress and style. I appreciate what you are doing for our cause, having myself been in journalism ten years with the Boston Herald."—Dr. Geo. W. Goode, Boston, Mass., January 9, 1909.

"The new 'Osteopathic Health' is handsome beyond expression—enough so to be a souvenir. The subject matter equals it."—Dr. C. A. Arand, Sandusky, Ohio, December 29, 1908.

"I think 'Osteopathic Health' in its new form is better than the old style."—Dr. J. L. Huntington, Santa Barbara, Cal., December 29, 1908.

"I think you have made a hit with your new idea. The appearance is much better—more of professional art. I like it very much. Keep right on going to the top."—Dr. L. B. Beavly, Ottumwa, Iowa, December 31, 1908.

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"We have found that 'Osteopathic Health' has done more for us than anything we ever used in our legislative work. As you know, we sent out the January issue to all members of the West Virginia Legislature for nine months and when the M. D.'s tried to tell members what Osteopathy was the legislators knew more than the M. D.'s did. We give 'O. H.' credit for our victory last year and we wish to guard against any adverse legislation this year. In this state society to see what good they could get from 'O. H.' sent to ten members for about four from three to nine months before the session,"—Dr. W. A. Pitcher, Charleston, W. Va., November 25, 1908.

"The O. P. Co."—A. T. Still, Photo-Craft Calendar Highly Praised

"I received the A. T. Still calendar and wish to thank you for the calendar. I think it splendid."—W. S. Mills, Ann Arbor, Mich.

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have seen."—Dr. Eugene M. Casey, Blinghamton, N. Y.

"Thank you very much for the calendar. It is very artistic in design and I prize it highly. I think it is a great likeness of the old doctor as I remember him."—Dr. Chas. A. Wolfe, Chillicothe, Mo.

"Please accept thanks for the splendid reproduction of the original picture of Dr. A. T. Still. I prize it very highly and have had it framed to hang in my office. Win. O. Flory, Minneapolis, Minn.

"Please accept thanks for the Father Still calendar. It is a 'beau.'"—Dr. C. L. Bieparg, Owosso, Mich.

"The A. T. Still calendar just received and it is beautiful and artistic in every way. I am glad to have the Old Doctor in this form in my office. I thank you most heartily for this very acceptable souvenir."—Dr. Arloyna Orr, St. Louis, Mo.

"Am very much pleased with the A. T. Still calendar. The picture is an excellent copy of the painting of the 'Old Doctor.'"—H. E. York, D. O., San Francisco, Cal.

PERSONALS.
Dr. R. O. Burton is now in practice at Fort Morgan, Colo. He reports prospects good.
Dr. C. L. Parsons, of Roswell, N. Mex., has been appointed to the territorial board of examination.

Dr. William S. Mills, of Ann Arbor, Mich., has been elected president of the city council on the democratic ticket.

Dr. Holbrook E. Daveport, of Brookville, Pa., is taking a course in the Northern Illinois College of Ophthalmology, Chicago.

Dr. Jessie Lyan, formerly of Goodland, Kansas, has purchased the practice of Dr. S. E. Morse at Longmont, Colo. Dr. Morse will go to San Diego, Cal.

Dr. W. R. Eisenhart, of Streator, Ill., is reported to have commenced suit for $200 against John Wagner and his wife, Josephine Wagner, for "labor and services."

Dr. M. E. Church, of Calgary, Canada, is reproducing in the local papers portions of Dr. Belle Case Harrington's article on osteopathy which appeared in the Cosmopolitan.

Dr. R. W. Rogers, of Clearfield, Pa., suffered a loss by fire two weeks ago. His branch office at Philipsburg was burned out. It had just been filled up and the loss was about $220.

Dr. Milton A. Barr, of Muscatale, Ia., delivered a lecture on "The Principles of Osteopathy," April 2d, before the graduate nurses of the city at the Hershey Hospital lecture room.

Dr. Norman D. Mattison, of New York City, has been tendered the chair of anatomy in the New York Homeo-Medical College. He is new superintendent of that capacity till the end of the school year.

Dr. Elizabeth Jackson Geyer, of Ogden, Ind., has purchased a new Buick automobile and is coming to Chicago next month to bring it home. She hopes to take in the Illinois state meeting at the same time.

Dr. Maurice B. Harris, of Ft. Worth, Texas, has sold his practice there to Dr. C. O. Hook and has formed a partnership with his brother. Dr. D. S. Harris, for the practice of osteopathy and surgery at Dallas, Texas.

Dr. Ralph Kendrick Smith, of Boston, appeared before the house committee on the Maine House of Representatives, March 10th, to present arguments for the establishment of a state board of examination for osteopaths.

Dr. D. S. Harris, of Dallas, Texas, is in Chicago doing "P. G. C." work at the Post-Graduate Medical School. He was a caller at "The O. P. Office" recently. From Chicago Dr. Harris expects to go to New York City and Europe for special surgical work.

Dr. P. L. Hodges and C. H. Stearns, of Washington, D. C., have moved into new offices at 1504 H street, N. W. In their new quarters they have four operating rooms, a reception room, office and connecting hallway. The new offices are larger in every way, and will be more convenient than the old location.

Dr. Evelyn Underwood, of New York City, had the misfortune to have her apartments completely burned out one day last month. The doctor escaped with her life and one shoe, which is much more than the owner of the lost property had accomplished. A host of loyal friends came out to her assistance, but the doctor had, fortunately, a substantial bank account in a safe place.

REMOVALS.
Dr. A. B. Wychoff, from Alton, Ill., to Booth, Tex.
Dr. J. H. Hook, from Montrose, to Telluride, Colo.
Dr. Barker & Barker, from Savanna to Eureka, Ill.
Dr. W. C. Williams, from Santa Rose, to Tulare, Cal.
Mr. T. Hartsook, from Oakdale to Rockford, Wash.
Dr. Oscar Leeper, from Blackwell, Okla., to Ashland, Ore.

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Dr. F. L. Liffring, from Portland, Ind., to Pavilion Building, Battle Creek, Mich.

Dr. A. L. Davis, Waycross, Ga., box 200.

Dr. J. C. Bowler, of Rensselaer, Ind., of Inglewood Park Cemetery.

Dr. Mary S. McKay, from St. Louis, Mo., to 560 E. 14th street, Washington, D. C.

Dr. P. L. Hodges, from 917 Thiselton street to 1564 H street, Washington, D. C.

Dr. F. J. Barrows has opened a branch office at Turon, Kans.

Dr. Florence J. Barrows has opened a branch office at 12 Madison avenue, Chicago.

Dr. Mary E. Pratt, from 967 Spitzer building to 1432 Euclid avenue, Philadelphia, Pa.

Dr. Anna H. McGavock, from 65 Washington street, to 201 Green street, to 306 Hotel Belvedere, Denver, Colo.

Dr. Elva Lyman, from Iowa Falls, Iowa, to 2-3 Marston Block, Madison, Wis.

Dr. D. J. Estes and Miss Hazel Alstrope, at Pacific Grove, Cal., March 13th, at Pacific Grove, Cal., aged 81 years. Would take practice of physician de-

Dr. L. O. Gooch, from Denver, Colo., to 322 E. George avenue, Atlanta, Ga.

Dr. P. W. Sweet, from Cleveland, Ohio, to 614 N. Truxtun st., Bakersfield, Calif.

Dr. Elva Lyman, from Iowa Falls, Iowa, to 2-3 Marston Block, Madison, Wis.

Dr. L. E. F. W. Willard, of Missoula, Mont., March 26th, a son.

Dr. T. W. Sheldon, from 1844 Sutter street, to 8-9 Golden Gate Building, Spokane, Wash.

Dr. F. E. Morley, from 1504 H street, Washington, D. C.

Dr. A. E. Freeman, from Cameron to 50 N. West street, Greenville, S. C.

Dr. A. E. Ellis, from 294 Penn Block, to Free- men Building, Bangor, Me.

Dr. K. E. Curtin, from Colorado Springs to Hotel Belvedere, Denver, Colo.

Dr. Anna L. H. L. Stewart, from 306 W. Nash street, Wilson, N. C.

Dr. M. G. S. Stewart, from 326-328 La Grande Building, Waycross, Ga.

Dr. Margaret M. Stewart, from 406-408 Lafayette building, Waterford, Iowa.

Dr. D. C. Bligh, from 930 Caribbean avenue to 402 National Bank building, Toledo, Ohio.

Dr. James C. Montgomery, from 600 Capi tol street, to 1432 Euclid avenue, Philadelphia, Pa.

Dr. Florence C. Bradley, from 1284 Oaks street, Columbus, Ohio.

Dr. C. H. Stearns, from 817 Fourteenth street to 1564 H street, Washington, D. C.

Dr. Mary S. McKay, from St. Louis, Mo., to 429½ Okmulgee street, Muskogee, Okla.

Dr. J. C. Bowler, of Rensselaer, Ind., of Inglewood Park Cemetery.

Dr. T. E. Shelden, from 1844 Sutter street, to Elk Grove Village, Ill., to Sacramento, Cal.


Dr. A. D. Pryor, of Blount County, Ala., of 30-32 Nolon building, Cripple Creek, Colo.

Dr. Anna H. McGavock, from 65 Washington street, to 814 Quarrier street, Charleston, W. Va.

Dr. S. H. Young, from 527 22nd street, to 1622 Second street, Galesburg, Ill.

Dr. A. C. Proctor, from 405-407 Packard building, Riverside, Cal.

Dr. J. C. McPherson, from 145 E. 39th street, to 510 S. Water street, to 814 Quarrier street, Charleston, W. Va.

Dr. S. L. Holton, from 600 E. 14th street, to 1053 Pennsylvania Ave., Washington, D. C.

Dr. C. H. Montague, from Spaulding Building, Portland, to Klamath Falls, Ore.

Dr. H. C. Montague, from Spannling Building, to Homestead building, Muskogee, Okla.

Dr. M. C. Newkirk, from 1000 Washington street to 412 W. 23rd street, to 510 S. Water street, to 814 Quarrier street, Charleston, W. Va.

Dr. L. B. Wingate, from 322 E. George avenue, Atlanta, Ga.

Dr. C. V. Elder, from 20th street, to 814 Quarrier street, Charleston, W. Va.

Dr. J. R. F. Harlowe has opened a branch office at Turon, Kans.

Dr. J. W. Smith, from 207 Duke building, to 201-202 Central building, Rochester, N. Y.

Dr. F. W. Swift, from Montgomery, Ala., to 325 Woodward ave., Detroit, Mich.

Dr. A. A. Basye, from 306 Hotel Belvedere, Denver, Colo.

Dr. Julia S. Bolam, from Monett, Mo., to 322 E. George avenue, Atlanta, Ga.

Dr. P. B. Fleming, from Montrose, Colo., Box 325.