A Remarkable Illustration of the Value of Osteopathic Educational Literature and the Crying Need of Its More Extensive Use in Our Cities

O NCE a piece of good osteopathic educational literature is put in circulation one can never tell how long it will continue to do effective service for the cause. This was clearly demonstrated by a letter that reached our office a couple of weeks back. The writer stated that she had just been reading a copy of Osteopathic Health dated November, 1906, and that she had since been more interested in seeing osteopathic physicians in New York City in order that she might arrange to secure treatment for her husband. Think of it! A magazine four years old still in circulation and finding its way into the hands of interested persons and producing tangible results.

The letter reads as follows:

550 West 163d St., New York City, November 15, 1910.

Gentlemen: Lying before me is a copy of Osteopathic Health, dated November, 1906. It contains your announcement. We recently moved to this city and I cannot find in the telephone or city directory any list of osteopathic physicians. Can you furnish me with a list, giving name, address and the year of graduation? My husband is feeling very poorly. He does not believe in osteopathy (because he does not know anything about it). I have a brother here and he also, for the same reason, does not believe in osteopathy. I have learned that there is a Dr. Helmer here, but am told that he is a specialist and very high priced, so I ask you to inform me of a good practicing osteopath who will give treatment at a reasonable price.—Mrs. Daniel Carter.

If this lady made thorough investigation in regard to the directory, the osteopaths of New York City are not alive to their opportunities. In Chicago, if osteopaths of the city are in the classified telephone directory under the heading "osteopathic physicians," there are thousands of people in our big cities who are not getting osteopathic treatment because they do not know anything about it. It is safe to say that not one person in a hundred in our big cities ever sees a copy of an osteopathic educational publication. Comparatively speaking, osteopathy is still a new science, and if we want to make friends we must let the public know something of what it stands for and what its principles are, and to make it intelligible to the lay mind it must be presented in popular phraseology. Also to make literature of greatest value it must be entertainingly written and done up in attractive form typographically.

It would be hard to overdo the distribution of good popular osteopathic literature of the right sort, but thus far we have not even approximated the danger mark in this respect! Nay! we have far from appreciated our privilege. We can bring relief and health to thousands who now suffer unnecessarily and as we, as a profession, have undertaken to guard jealously the integrity of this great health restoring system, which has been deliberately into our keeping, it is our duty both to ourselves as a profession and to the public at large, to let the truth be widely known. There is no method by which the truth can be so effectively disseminated as by the printed word, and the incident just related shows that the seed we scatter here and there in many cases retains its vitality indefinitely and springs up and bears fruit when we least expect it.

Anatomical and Physiological Pictures of Diseases

Aerospasm

Being Chapter XII of This Series by Dr. E. E. Tucker, of New York City.

THE meaning that the word gastritis has for the lay is in very many cases derived from the association of the first syllable thereof with the English word gas—the name is often associated with the belching up of large amounts of gas. Of course the word gastritis means inflammation of the stomach, and it is due to the gas that sometimes accompanies the condition.

But there is as a matter of fact, a condition included at present under the head of flatulent gastritis, in which there may be no indications of gastritis, or indigestion, or even the oesophagus, instead of through the trachea, may serve to bring it on.

There have all seen cases of supposed gastritis in which immense quantities of gas escape from the stomach in noisy and distressing to the layman, and the public generally.

In etiology the affection is a neurosis. We have all seen cases of supposed gastritis in which immense quantities of gas escape from the stomach in noisy and distressing to the layman, and the public generally. It is found in semihysterical persons and those whose nervous systems are under some exciting strain. Any little excitement or shock may serve to bring it on in those disposed to it, particularly a fear of the condition itself. Among the causes are excessive venery, disturbances of the pelvic visera in males or females.

The stomach itself may be a prime factor, though it is surprising in how many cases no tenderness nor indigestion nor other evidence (Continued on page 7.)

MERRY CHRISTMAS AND HAPPY NEW YEAR
The Osteopathic Physician

Study and Sight-Seeing in Europe

M. C. Hardin, D. O., Atlanta, Ga.

I am glad to respond to your request for an account of my trip to Europe for study in the clinics there.

It has been my desire many years to go to some of these great medical centers and avail myself of the teaching and observation of those who possess them. It is a fact, I suppose, which will not be disputed, that the Germans are the greatest students of theoretical medicine in the world, while we in America are the greatest practitioners of applied medicine. The problem everywhere in the European schools, and especially so with the German, is diet and diagnosis. They want to find out what is the trouble with the patient and how he came to get into such a condition; how did the disease begin, and what was the train of events physically that brought about his present condition. When these questions are answered the German seems to lose interest. They will split hairs and dig and delve to prove their theory of disease and diagnosis, but when this is done their supreme effort is spent.

We in America are more practical. We are interested to some extent in the history of the case and the train of events within the body that induce the condition in which we find him—but far more in the immediate cause of the present condition—but when this is done, and many times not very carefully and rather hastily, we are more than anxious, in our practical way, to help the patient get well. If the patient is an osteopath, our speaking our hospitals are better equipped to practically care for the sick in the way of restoration than the best hospital in Berlin will be, when entirely completed, perhaps the best equipped hospital in the entire world. By my remarks above I only mean to say that in America we place the greatest stress on the theoretical side of medicine, while in our more practical civilization emphasize rather the applied side of medicine.

I killed two birds with one stone.

Study and Sight-Seeing.

I went to Vienna to study in the University Hospital there. This is the only place I spent any time in study. My wife and son were both with me. We went one route and came another, thereby as we visited ourselves as the saying goes—practicing as practicable. We landed at Cherbourg and went from there to Paris. From here we went through Switzerland, stopping at Geneva, Montreux, Interlaken, Lucerne, and Zurich. We had arranged to go from Zurich to Innsbruck by rail and drive from there through the Tyrol mountains, Chur, and Grisons. We had a visit to the Clinic in the Lorenz Klinik, a course in Nervous Diseases, one in Diseases of Thorax, in Gross and Microscopic Anatomy, and a course in Becher's Museum of Osteopathic Medicine, Kirksville, MO. M. C. Hardin, D.O., Atlanta, Ga.

One afternoon as I walked into the Lorenz Klinik, the class was in the midst of a discussion on diagnosis. Dr. Werndorff, who has just returned from America, had asked some of the doctors about osteopathy. I was not there at the beginning of the discussion, but as I entered they were in the midst of it. Two members of the section from New York were there. These two were in the controversy.

One of them had been practicing about ten years, the other about twenty years. They had carried on to a great extent the osteopathic method of treatment and had taught others. "We have a very fine class of men," said one. They may give very good massage, but they are not educated. The other one was addressing Dr. Werndorff: "The first one that located in our town was a lady. I had a patient one day who had a case of pneumonia and I sent the lady to her. She got fine results. Her massage was so much superior to the regular massage that I often sent her patients after that. By and by a gentleman came to town and he sent him a patient one day to massage, but he went up in the air at my suggestions of massage. The lady did not like them at all. She sent me to the man. They may give very good massage, but they are not educated." At this the other man turned upon him and with considerable vehemence said, "They have a course in Osteopathy. I attended with the Board of Examiners and they stand the same examination that you stood and how could they do this unless they knew their stuff. I know all about osteopathy and I am sure they are educated!" Dr. Werndorff then said that he was glad to learn more about the osteopaths as he had frequently heard them spoken of. He then called the clinic to order. It appears that our defense is not always taken as seriously as it should be, but not exactly as we might do it. I felt I wanted to take our defendant by the hand and tell him that I appreciated his defense on a foreign soil.

My stay was a pleasant one in every respect. I found the A. M. A. fellows a very fine class of men. They have their prejudices just as we all have. When I first went there I met a man from the South who had been there for quite a while. He told me if he were in my place he would say nothing about being an osteopath. This is a very fine class of men. In the various branches it has long been exploited by so many irregular practitioners. It would almost seem as if an element of mystery was necessary to make any system popular amongst medical men, and this belief is strengthened by the fact that the only physical method they have so far carefully studied and practised has been electricity. The prevention and cure of disease by manipulation has been resisted by many of the practitioners who dabbled in its has been too often looked at askance by his medical brethren. If we are not to fall behind in the race for honors in this branch of therapeutics, it is high time we began to interest ourselves more deeply in it, as already the medical profession in America is suffering severely at the hands of a new race of manipulative practitioners, who have recently, indeed, invaded our country.

At all times interested in such methods of treatment, I went to America to see this practical asphyxiation, called—and that these men were accorded the legal status and privileges of the medical profession in all but one or two states in the Republic. I therefore set myself to study carefully all the books which I could obtain on the subject, and in addition endeavored to obtain such practical knowledge of its methods as was possible in this country. Having learnt all I could in this manner, I subsequently visited America to see the treatment in the land of its birth, and was astounded to discover that it had not only taken a great hold upon the affections of the people, but that no fewer than a dozen schools were in existence for imparting instruction on the subject, and at the same time granting diplomas to those who had spent three years in its study. The tuition was in great part conducted by medical men who were appointed executives of the schools, and who were not of the osteopathic order. It was not at all uncommon to meet a medical man with a diploma in osteopathy as a therapeutic method, and whilst its hold upon the affections of the people is invincible, it is manifestly necessary that we osteopaths give a thorough knowledge of anatomy as the groundwork of the art.

I was cordially welcomed not only at the schools but at the dispensaries, and at every opportunity of conversing with the patients as to any benefit received, as well as comparing
all have vertebrae or other subluxations of a serious type, and I am glad to say that in my interview with leading osteopathic practitioners and teachers in America I had repeated confirmation of this fact. I was assured by one who rarely found them, and by another well-known teacher that he never thought of looking for them. It is important, therefore, to inquire whether there are no other conditions present which contribute to the unquestionable relief acknowledged by some of their patients.

This is found in that state generally described by them as 'contracted muscle' condition, now being recognized by other medical men outside of the osteopathic ranks.

Boardman Reed in his work, Diseases of the Stomach, quotes Dr. John P. Arnold, who describes this peculiarity as a somewhat dubious swelling, or in chronic cases gristy, tense, cord-like feeling of the muscles, more particularly the erector spinae. Flint and Hammond likewise refer to the condition, and give rules for diagnosing and treating it. I have no hesitation in saying that the vast majority of his cases are quite capable of being successfully treated by other methods, and I am confirmed in this view by the statement of the dean of one of their schools, who assured me that all well-educated osteopaths were perfectly cognizant of this fact. I am convinced, however, that many ailments, and especially acute conditions such as typhoid fever, pneumonia, nephritis, "cold in the head," are liable to be seriously aggravated by manipulative attention. It is lamentable that the apprehension of mechanico-therapy should result in such ill-guided enthusiasm as its application to many acute disorders would testify. Every now and again the American medical journals, and even the law reports of the daily papers, contain records of cases injured during osteopathic treatment, but the system has now such a large public following, and its legal position is so secure, that it is difficult to obtain a conviction. If it be a system of medicine, at the best it is purely a system of one idea. Its etiology is a lesion; its symptomatology, a subluxation; its treatment, manipulation; its therapeutics, manipulation; while its pathology is accommodating enough to cut both ways, the subluxation being either the cause or the effect of departure from function.

Despite these limitations, however, as a method of practice it is certainly right in this, that it is not only in emphasizing the value of manipulation in disease, but laying stress on cases which have previously been ignored or undiagnosed by the profession, and hence have fallen into the hands of the bone setters.

We are too much in the habit of thinking that bone setters make their reputation by breaking down ankylosed joints in patients who have refused the services of or become impatient with their own medical man. This may be, and no doubt is so, but the reputation of the system would be short lived were this all their work, for nothing could prevent the most disastrous sequelae in a very large proportion of their cases.

The regular practitioner of medicine has an accountable reverence for bones and joints, especially in the lower extremities, and this fact was admirably pointed out by Dr. Wharton Hood many years before osteopathy was invented. He referred to the results of a careful investiga-

tion into the methods of Hutton, the bonesetter, and showed that he obtained his results by a combination of relaxation and counter-pressure, much in the same way as the osteopath, and that his special point of attack was the spinal column. But his book has almost been forgotten and his precepts neglected.

The simplest definition of osteopathy which I have yet met is the correction of anatomical abnormalities which produce physiological discord, but its exponents do not hesitate to claim for it a much higher status. They almost all agree in calling it a distinct system of medicine whose therapeutics consists in: (3) Manipulation, including surgery, for purposes of readjusting tissue relations; (2) scientific dietetics; (3) personal and public hygiene. It must be confessed, however, that manipulation is practiced to the exclusion of every other method, and the system is acclaimed as one which permits you to eat and drink what you fancy and to live as you please, so long as you do not ignore the more important laws of health. The diagnosis consists in the discovery of a "lesion," which is something more than that so well known in surgery, and is defined as a structural change which affects the functional activity of any tissue. Such lesion may be found in any tissue, but its existence is more easily recognized in bone, ligament, and muscle. The most common varieties of lesions are what are called "subluxations" of bones, thickened ligaments, and "contracted" muscles.

A true lesion is said to be palpable, sensitive on pressure, and the functional disturbance produced has some relation to the anatomical abnormality existing. The point d'appui, however, of the osteopathic system is the subluxation, and most practitioners of the art are liable to find one or more in every case they examine. The centre of attraction is the spinal column, and the relation of its various vertebrae to one another and the ribs. The slightest change in the normal arrangement of the bone, nerve, or muscle, represents a subluxation, and this may be primary or secondary. In the former case it is produced by direct action on the bone or muscles controlling its movement, and is the result of irritation to the spinal nerves in direct central relation to it. In this way it is stated to affect the viscera and blood vessels, thus causing various symptoms of disease. In the latter case it arises from excessive irritation to the peripheral ends of sensory nerves, either those terminating in the skin and subject to temperature changes, or those ending in the visceral mucosa and subject to irritation from the presence of food of an indigestible character, etc. Presumably the pressure of secondary subluxations on the spinal nerves will make them as dangerous as the primary variety, and certainly as necessary. The chief function, therefore, of an osteopath is to reduce the subluxations and to correct the lesions which he may discover, and in some isolated cases this may be done in what is called "one treatment." The fact, however, that the majority of cases must be treated for two or three treatments, proves that they are not easily treated; and, needless to say, it would not pay the osteopath to cure his cases so quickly.

The usual course is to charge an initial fee for twelve "treatments" at the rate of three per week and to continue the treatment of the case for one or more months, thereafter giving "treatments" less frequently, although it is sometimes found that patients are unable to stand treatment so often. But patients suffering from all forms of disease who consult an osteopath are treated solely by manipulation. Manifestly they cannot
We Are Both Working for the Same End

You, doctor, by your strict physical examinations must discover the appalling prevalence of spinal trouble. In your practice, and in your studies, you have discovered the need of some practical appliance designed on scientific principles, as a substitute for the old, cumbersome and painful operations of plastering, leather, and starch jackets, as an adjunct to your treatment of spinal deformation.

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PHILo Burt MFG. CO., 15th St Jamestown, N. Y.

I do not hesitate to plead for the admission of this new form of scientific home-setting among the recognized methods of treatment practiced by the medical profession. My success in the following cases is entirely due to the study I have made of the subject, and I am sure I would have failed to do so had it not been for the aid in all such cases, doubless you have discovered the need of some practical appliance designed on scientific principles, as a substitute for the old, cumbersome and painful operations of plastering, leather, and starch jackets, as an adjunct to your treatment of spinal deformation.

J. F., aged 48, consulted me on August 24, 1906, complaining of pain, of six months’ duration, in the right occipital region. His head was turned slightly to the right side, and when I asked him to look straight at me to the front he said he could not do so on account of the pain. His story was that six months previously he slipped down eight steps, falling on the right side of his lumbar region. He asked a friend to come and help him up, but he would not remain in bed for four or five days. At the expiration of this time he was well enough to get up so far as the pain in his back was concerned, but the pain in his head—or “headache” as he called it—was as bad as ever, and he considered this strange, as he had never had a headache in his life before. During the ensuing six months he saw several doctors, amongst them a consulting surgeon, but derived no benefit. When I examined his neck I found a distinct and decided subluxation of the atlas, the first and only one I have ever come across in my four years’ experience of this kind of work, although we are to believe the osteopath this is the most frequent subluxation in the body. I had no doubt that the subluxation was caused by the new angle of the left inferior maxilla and the right transverse process near the right mastoid bone. I considered that there was pressure on the spinal nerves, and accordingly I endeavored to place the body at the same time. During these three movements the thumb exerts pressure on the side; (2) lateral flexion of the body to the upper, or lower surface of the spinous process, and, in the third movement especially, endeavor to replace it. This is not always possible the first time it is tried, and even when successful the bone does not always remain in position. This is obvious from the fact that in this case the shape had been altered by the patient’s residence in new cylinders and its ligaments and muscles stretched and weakened by that unaccustomed tension. In the case in question I found at a subsequent visit that the patient had not required any further treatment, and required reposition; but after half a dozen experiments of this kind it stayed in place and the pain disappeared. I had to be careful in my movements in order to avoid her mode of sitting and walking. I believe that awkward posture had much to do with the occurrence of the malposition of the vertebrae, and it is double-blessed to this fact that so many backaches persist, despite repeated medication and treatment.

The habit of sitting with one leg crossed over the other and the shooting backwards of the lumbar curve must occasion great strain of the ligaments and muscles of the spinal column. It is, therefore, of the utmost importance to use such patients in more physiological habits and to encourage them to indulge in a few physical exercises to strengthen the muscles.

I am indebted to Dr. Stacey Wilson in February of last year, suffering from pain of seven months’ duration in the lower region of his back, the creas of the ilium, the pubis, and shooting down his left leg. He was a quarryman and had fallen from a height of 40 feet on his back. Fortunately, the fall did not bruise the bones. On examination, I found that the posterior spinous process of the left innominate was depressed into the pubic region, which was more than that of the right side and a slight inequality in the pubic region. The two left lumbar vertebrae were likewise too prominent.

THE OSTEOPATHIC PHYSICIAN

Museum of Osteopathic Medicine, Kirksville, MO
I concluded that the force of the accident had been spent on the tissue in the neighborhood of the crest of the left ilium, and had forced the whole immane from its position, producing a rotation upwards and forwards along an axis which is not only the usual habit of the axis of rotation, but also the axis which, after much preliminary relaxation, I therefore applied force in such manner as to endeavor to make the inanimate parts take the opposite direction, and was gratified to find that by degrees the bone responded. The treatment was repeated at infrequent intervals, but with improvement by the end of July the patient was practically well.

Books on surgery declare that such conditions as I have described are very rare, whilst according to osteopathic teachings they are frequently to be met with. The symptoms are almost identical to those of latumations of the atlas, and many strange and varied symptoms are attributed to the deformity. In all probability the action occurs more frequently than we are willing to admit, and, like the case just quoted, left unrecorded with disastrous consequences.

I might go on quoting cases of a similar kind which have occurred in my practice, but I have described a sufficient number to show that slight deformities can be present in the bony frame which are not capable of giving rise to symptoms which are liable to be overlooked by medical men. Cases of this kind frequently fall into the hands of the osteopath, and, after all, the treatment described in this book is no more or less than one of scientific or regulated bone-setting.

None of the cases which I have described could have been treated successfully without some form of manipulative therapeutics, and it is of prime importance that we should be prepared to recognize and deal with such cases. If we deny the existence of such cases we are making it impossible for nature to be free; we are in danger of overlooking the presence of such irregular practitioners of the art as we have described. We know that there are three sets of muscles between individual vertebrae—the intertransversales—the intercostales—and the erector spinales, which are all met with in the back of the body, although inconstantly and irregularly—and the eleven pairs of rotatores spinae in the dorsal region. These last especially do not exist in the bony framework as such, but have the possibility of rotation between individual vertebrae such as is affirmed by the osteopath, and it is not incredible that the action of the other two pairs may occasionally be capable of producing or hindering the transverse and transverse processes towards each other.

It is reasonable, seeing that the erect posture is maintained by a distribution of a strain equally throughout the bony framework. We may infer that when there is a displacement of one of these vertebrae too much strain will consequentially fall upon the ligaments and muscles between it and its neighbors, and until it is replaced pain will be likely to arise. The conservatism of the medical profession has allowed many forms of treatment, like massage, osteopathy, electricity, and Swedish exercises, to be monopolized by irregular practitioners when they should have been captured for the benefit of rational practitioners of the art. I should like to add a few words with regard to the use of this form of manipulative treatment in cases which are usually quite successfully dealt with by other therapeutic methods. It is the special weakness of this, as of every other, method of treatment that too much should be claimed for it by its devotees, but as the ostensible therapeutic mode of treatment they are compelled to use it in every kind of case, to the exclusion of every other form of treatment. When one considers that it is the only recognized and local mode of treatment they are compelled to use it in every kind of case, to the exclusion of every other form of treatment.

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neighborhood of their angles—in one case the eighth and ninth ribs, and in the other the eighth, ninth, or tenth. Ribs, being bone, are biomechanically set in the body in such a way that some indistinct curve of the proximal fragments of the ribs may have irritated the sympathetic chain either directly or through the rami communicantes connecting the sympathetic plexus with the Splanchnic nerve. Mr. Adams attributed the paralytic condition of the bowel to irritation of the great splanchnic nerve arising from the sympathetic chain with the spinal nerves. The same nerve, he said, controlled the fluids of parts or the whole of the body. Obstruction to the body forces (blood, lymphatic, nervous, etc., etc.) is toward developed sense of touch, etc., etc.; osteopathy. Their structure and degrees of the various vertebræ, of his highly developed sense of touch, space, and pathologic micro-organisms, toxins, etc., etc., and any distinguishable abnormality of structure or of function (more especially that of structure) constitutes what is known as an OSTEOPATHIC LESION which may be either PRIMARY OR SECONDARY, or both according to the circumstances comprehended as predisposing or exciting; and they are the result of any one or more (in combination) of the following CAUSAL CONDITIONS OR influences which may be either predisposing or exciting, viz.: (1) Meteorologic; (2) Psychologic; (3) Electric and Magnetic; (4) Dietetic; (5) Abuse; (6) Chemical and Drugs; (7) Traumatism.

Osteopathic EXAMINATION and DIAGNOSIS requires the personal and detailed anatomical and physiological examination of each individual case by the examining osteopath. The conditions of the body are subjected to systematic and methodical, logical and mechanical, study. Thus, the OSTEOPATHY, in its PRINCIPLES AND PRACTICE, comprehends and includes all those various phases of health and disease as are covered by the other SCHOOLS OF MEDICINE, SURGERY, MID-WIFERY AND SANITATION.

Osteopathy, as a word, is derived from two Greek words, viz., OSTEON (signifying—a bone) and PATHOS (suffering). It is generally adapted as a name inasmuch as the bony framework is such a part of the body upon which order depends. While the osteopath uses the bony framework of the body as a basis, he learns to use it as a lever (primarily) to assist him in restoring order and thereby relieve suffering.

OSTEOPATHY differs from all other "SCHOOLS (Systems, Methods or Cures) OF MEDICINE," (A), in its ETIOLOGY ("the science of the cause of Disease"); (B), in its Prophylaxis (the science of disease prevention); (C), in its Therapeutics ("that branch of Medicine which treats of the application of remedies and the curative treatment of Diseased states").

A. In its ETIOLOGY, Osteopathy declares that the cause or the origin of any of the established laws of nature, intracorporal or extra-corporal, of the body forces and fluid forces constitutes the condition commonly known as DISEASE, which is an effect and the abnormal resolution of body forces.

DISEASE, then, is "any departure from the state of health, presenting well-marked symptoms and having a definite character" in structure or function or both.

HEALTH is "the condition in which all the functions of the body and mind are in a normal state" co-ordinated with the normal and harmonious relations of all body structures and the unobstructed action of the body forces and fluid forces through their natural channels. Harmonizing with the above-mentioned definitions of HEALTH and DISEASE, Osteopathy declares that the CAUSE OF DISEASE is essentially and primarily, abnormal variations in body structure such as paralysis, rigidity, etc., in combination with the impaired normal function of the organs or tissues directly or indirectly involved. Abnormal functioning predisposes to abnormal structure.

The founder of Osteopathy, Dr. A. T. Still, declared that the beauty of the art of guarding the body mechanisms with co-ordinate abnormality of structure is evidenced (1) in the purposes set forth in the Original Charter of the first Osteopathic Organization, the American Society of Osteopathy, Kirksville, Mo., in part: "To purge from our present system of Surgery, Obstetrics and Diseases generally, to place the same on a more scientific and clinical basis; (2) TOXICOLOGY, as practiced in the American Osteopathic Association; (e) ADJUNCT, or extraneous methods or means as are common to all schools of Medicine and Health and Disease during the full term of pregnancy and the confinement succeeding labor; and (f) OBSTETRICS, or Midwifery, Osteopathy asserts, includes all the various phases of health and disease during the full term of pregnancy and the confinement succeeding labor.

(c) OBSTETRICS, or Midwifery, Osteopathy is based upon the same fundamental principles as in the regular Prophylaxis and Diagnosis.

(d) TOXICOLOGY, as taught and practiced in the Osteopathic Colleges, provides for the application of ANTIDOTES for Active Poisons; and destroys or destroys or endangers the properties, the habits, or the means or means as are common to all schools of Medicine and Health and Disease during the full term of pregnancy and the confinement succeeding labor; and (f) OBSTETRICS, or Midwifery, Osteopathy is based upon the same fundamental principles as in the regular Prophylaxis and Diagnosis.
(f) SANITATION, as recognized by Osteopathy, is that Branch of Science that renders healthful, or hygienic, the surroundings or conditions on which life is dependent—either as applied to the individual or to society in general; and as such, Osteopathy seeks to investigate in its personal and public teachings the best rules of LIFE and ACTION.

Osteopathic Sanitary Science embraces a consideration of the various influences, acting with beneficial or deteriorating effect on health or disease, with the view of ADJUSTING the individual or the community as a whole, to their respective environments—or vice versa: and as taught and practiced by the Associated Colleges it is comprehensive and inclusive of those methods common to all schools and co-operative with the National and State Laws of Public Health whereby the health and safety of the whole community may be protected against the errors of a part—the prevention of ameliorating of disease by the removal of its avoidable causes.

(g) PSYCHO- THERAPY has its place in Osteopathic Therapeutics as a secondary factor in the relief and cure of disease. “That the influence of the mind upon the condition of the physical body is one of the most potent, potent and unmistakable pathological and physiological facts of all Nature” is recognized by this, as well as by all other schools of healing; and this Truth in Nature is utilized as a factor in its other modes of treatment “in just so far as the mental state, condition or attitude of the patient is or may become a salutary factor in all the therapeutic process.” This is based upon three constituent mental elements, viz.: 1. The desire to be well; 2. The will to become well; 3. An abounding and unavailing faith that the agencies employed will make him well.

For further detailed information or facts as to the Philosophy and Principles of Osteopathy, its history, development, institutions, law and literature (all of which indicate a marvelous growth and expansion), the inquirer is referred to the Encyclopedia Americana under the heading “Osteopathy.”

Anatomical and Physiological Pictures of Diseases

(Continued from page 1.)

of stomach trouble is discoverable. The vast accumulation of gas in the stomach is often due to the fact that no so much of the gas escapes as enters, and each spasm adds to the amount in the stomach. This residual gas may then escape in a natural belch, and convince the patient that the physician is in error when he says that the real source of the gas is the patient’s own intake of it. The semi-hysterical condition makes them quite prone to take this view.

The patient being comparatively insensible of the first act, believes he is relieving himself of gas on the stomach and repeats the act in that hope.

The condition is largely a sensory neurosis, the spasm being secondary and to quite an extent of a voluntary act, just as coughing is to some extent voluntary. A sensory neurosis of the oesophagus takes the shape of a feeling as though gas were present. The patient can not control it, and the act seldom interrupts speech, or any other voluntary act, and ceases when the attention is sufficiently occupied on other matters.

Once the sensory neurosis has resulted in the spasm and the gas has entered the stomach, irritation is set up by its presence and its coolness and this tends to further excite the nerves. The sensation will persist even though all the gas escapes again, and for some moments there is a sensation as of more gas in the stomach. This leads to repetition of the act, which without the intervention of the will or some distraction or remedy tends even in normal persons to become worse. In neurotic individuals it becomes a habit spasm of great intensity and some danger.

The co-operation of the patient is therefore necessary for a cure, and his confidence in the physician is of paramount importance. Deep breathing through the nose, a drink of cool (not iced) water, singing and other physiological uses of the oesophagus and pharyngeal muscles are of value. The seventh and first dorsal segments are important osteopathic centres. All sources of nervousness should be removed, and every measure that promotes nervous stability should be encouraged. A complete change of environment will often affect a cure.

The question of a proper designation for this by no means infrequent malady is not an easy one. The name gastrocolic has been suggested, as also the name garulitas oesophagi. These are impressive names, but they have the disadvantage that they would help the patient to believe it was a pretty sick man should he hear them. The name wind-spasm, or, if Latin be preferred, aerospasm or aeroluscos, seems to me preferable.

Before venturing to assert that I had “discovered a new disease,” I submitted this paper to a number of New York practitioners. The findings were corroborated by all of them. This disease is a companion to hiccough, being the sensory and motor disease, while the latter is the purely motor affection originating in the oesophagus.

There was once a physician who was called in to amputate a man’s leg. The patient was put under the influence of ether and when he regained consciousness he observed the doctor standing beside the table with a worried look on his face.

“Pardon me,” grasped the physician, “but I fear I have cut off the wrong leg.”

ATWOOD GRAPE FRUIT

L AST season we placed emphasis on the curative value of citric acid as found in the ATWOOD GRAPE FRUIT.

With the first suggestion of the use of this grape fruit in rheumatic and febrile conditions came a quick endorsement from physicians and the public. We say “as found in the Atwood Grape Fruit,” for Atwood Grape Fruit is so far superior to the ordinary kind that it is admittedly in a class by itself when used either as a luxury or medicinally.

Its superiority is not an accident. From the beginning the Atwood Grape Fruit Company (the largest producer of grape fruit in the world) has sacrificed everything for QUALITY. An initial expense of hundreds of thousands of dollars was incurred; everything that science or experience could suggest was done to produce QUALITY; even then, many trees, as they came to maturity, bore just good, ordinary grape fruit, but not good enough for the Atwood Brand. Therefore thousands of big, bearing trees were either cut back to the trunk and rebudded to SUPERIOR VARIETIES or dug out entirely.

So through the various processes of selection, cultivation and elimination has evolved the ATWOOD FLAVOR, as hard to describe as it is difficult to produce.

Atwood Grape Fruit is sold by high class dealers and always in the trade-mark wrapper of the Atwood Grape Fruit Company.

Buy it by the box; it will keep for weeks and improve.

Price for either bright or bronze, $6 per standard box containing 54, 64 or 80 grape fruit.

ATWOOD GRAPE FRUIT CO., 290 Broadway, New York City
THE OSTEOPATHIC PHYSICIAN

We most heartily recommend this suggestion and hope it will be acted upon favorably by a large number of states.

We should be glad to hear from state officers on this subject for publication. We will also encourage to this record they can inform them of all cases coming to our

The very sensible suggestion has been made that the movement is taken up enthusiastically so as to help in making the fact well known. If the movement is taken up enthusiastically it will gain a unique and valuable feature of the A. O. A. National Convention of 1911.

Lest we forget! A. O. A. National Convention, Chicago, July 25th-28th, 1911.

T_E_ OSTEOPATHIC PUBLISHING CO.

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Ralph Arnold
Assistant Manager

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Editorial

Fairness! Freedom! Fearlessness!
"How to the line, let chips fall where they will!"

Vol. XVIII DECEMBER, 1910 No. 6

A. O. A. National Convention, Chicago, July, 1911.

ASSOCIATION MEETING DATES.

Without question many of our state meetings would be better attended if the date was kept constantly before the profession for some months in advance. For this reason we have started a column of association and society meeting dates. We shall be glad to receive for publication in this column the advance dates of as many meetings as possible. The date cannot be given far ahead as it will be reported each month until the event occurs. This department will prove of value also to travelling members of the profession, as by reference to this record they can inform themselves of meetings taking place at points where they expect to be on certain dates and thus arrange to attend and enjoy the programs of the fellowship of those present. Send in your dates and make this a live department.

Lest we forget! A. O. A. National Convention, Chicago, July 25th-28th, 1911.

STATE MEETINGS IN CHICAGO.

The very sensible suggestion has been made that as many states as possible arrange to hold their regular meeting for 1911 in Chicago, just previous to the National Convention.

If the plan is to be carried out by the various state organizations the Chicago Arrangement Committee will see to it that every facility and accommodation is provided for the visiting associations. If desired separate headquarters will be secured for each organization, with special meeting halls.

Advance arrangements will be taken care of at the several hotels so that everything will be in readiness for the various state officers and delegates when they arrive.

It also will be arranged so that the state meeting places will be convenient to the La Salle Hotel, the National Convention Headquarters.

What the Massachusetts Law Requires and Permits

EXCEPTION has been taken to the re-capitulation of the Massachusetts state law which appeared in the October issue of "Osteopathic Health" not being sufficiently clear. We wrote Dr. Warren A. Rodman, of Boston, chairman of the Publicity Committee of the State Osteopathic Society, and in the following brief elucidation of the law:

1. The Massachusetts law allows anyone who chooses to take the examination before the State Board of Registration in Medicine.

2. The graduates of the Massachusetts College of Osteopathy receive the graduate certificates.

3. Only those osteopaths who were admitted under the special registration act are limited in any way.

4. "Osteopathy and osteopathic mean the same as medicine and medical in the eye of the law. Unregistered persons practicing osteopathy without a license can be prosecuted under the law.

5. The two Georges have been prevailed upon to give another Review Week this Christmas, December 12 and Dr. Still from 1 to 4 o’clock.

THE A. T. Still Park Springs Sanitarium

R. H. S. BUNTING—Realizing the great need of the osteopathic profession to have a pure sanitarium, I am writing to you to know you have recently opened The A. T. Still Park Springs Sanitarium at Bentonville, Arkansas, and also to give you a few facts concerning our institution.

The sanitarium is a large pressed brick structure, steam heated and lighted with electricity, and can accommodate from seventy-five to one hundred patients. The rooms are large, cheerful and well ventilated, and arranged looking to the comfort and convenience of all patients.

The building is located in the center of a beautifully wooded park of ten acres, which contains over four thousand feet of granitoid walks and numerous flowers, blooming ten months in the year during the holidays. Those who were there last year will be back if possible, and those who were there will do well to make up for lost time. This year the classes begin at 9 a.m., Monday morning, December 25th, and run until 4 p.m., Saturday evening, December 31st, with intermissions for food and sleep. Dr. Laughlin lectures daily from 9 to 12 and Dr. Still from 1 to 4 o’lock.
THE OSTEOPATHIC PHYSICIAN
State Osteopathic Associations
Take Notice

The arrangement committee for the A. O. A. convention, in Chicago, July 25th to 28th, 1911, extends a cordial invitation to all state osteopathic associations to hold their annual meeting in Chicago Monday July 24th, preceding the national convention.

The committee will procure suitable meeting places in the hotels, supply clinics, if necessary, and arrange all details for the convenience and comfort of a successful state meeting.

Will the officers and trustees who have the appointing of the time and place, especially all those states which hold their meeting in the summer months, kindly take this matter up at once and decide it?

We would like to get in communication with the chairman of the arrangement committee, or some one in charge, of each state which accepts this offer as soon as possible, that nothing may be left undone for the benefit of their meetings.—J. R. McDougall, D. O., Chairman Arrangement Committee.

The Road to Tuckahoe


Dr. J. C. Howell took a ride to Tuckahoe and received such a warm reception that he has not been able to write any poetry before the following effusion, he says "simply bounced," out of him. The roads of good roads are so pleased with the accurate description of the road that they are sending out the lines as a card in the good roads movement.—Pittsburgh, N. J., Press Dispatch.

Would you a-motoring go from May's Landing to Tuckahoe?
Then "take it from me" and go very slow, "there's a reason."
There're humps and bumps and jerks and jumps and holes which do not
There're ruts, and juts and sand and dust and things that make you weep:
And the way you roll and rock and creep, you'd think you're out on the briny deep.
For there is no road when you come to see, but only a place where it used to be.
A philosopher wage, with wisdom filled, said, "Folks are judged by the roads they build.
If this is true, and it is, we know, then what of the people of Tuckahoe?
For when they 'rive at the pearly gate they'll have a mighty long time to wait.
St. Peter will look at them scowling, stern,
And order them each and all return,
And eternity spend with a devil to goad, driving over that terrible road.
So let us pray while yet it's well, they may mend their WAYS and avoid such hell.

The Change in Therapeutics

Wilbur D. Nesbit in Chicago Evening Post.

"Corsets should be prescribed by physicians."—Dr. Martin.

"Oh, doctor," I pleaded, "I'm terribly ill; please mix me a powder or give me a pill.
My temples are burning, my pulse is quite fast.
"Not now," cried the doctor, as he hurried past.
"My auto is waiting to rush me downtown,
To plan a new corset for old Mrs. Brown."

"Oh, doctor," I begged of another M. D.,
"I'm awfully ill, as you plainly can see.
My tummy is aching, my throat is quite sore.
"Not now," said the doctor, and left by his door.
I had not time to be dosing for that,
I've got to prescribe Mrs. M'Ghee's balsam."

"Oh, doctor," I wept, to one more of the craft,
"I was sent to one more of the craft.
My symptoms are rapidly driving me mad,
A pain in my side and a feverish brow.
"Not now," snapped the eminent doctor, "not now!
I hope you get better; pray pardon my haste—I've got to prescribe Mrs. Perkins's chlorides.

Dear doctor," I groaned to an allopath man,
"Please give your earnest professional scan;
My larynx is twisted, my lungs are inflamed—"
"Not now," did the doctor, and left by his door.
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I've got to prescribe Mrs. Perkins's chlorides.

"Say, doctor," I sobbed to a homeopath,
"I'm suffering till I am as thin as a staff,
You see I am ailing with St. Vitus dance—"
"Not now," said the doctor, with never a glance,
"My doses are frills, as if I might afford them;
I've got to prescribe a grand-opera dress."

The Hands of Ernest Sisson, D. O.,
of Oakland, Calif.

BY A PATIENT.

Too small they seem, his hands, for so great might,
Yet in their gift is peace and quiet sleep.
Soothing for pain-racked limbs; for those who weep
Fresh courage with the morn, fresh faith at night.
Through their wise skill the blind receive their sight,
The maimed grow straight, the crippled run and leap;
—Such power have they to call the forces deep
Of nature's self to work for health and right.

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Of nature's self to work for health and right.
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The First and Only Osteopathic College which has complied with all the requirements of the Board of Regents of New York.

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The New Harvey School of Anatomy will be housed in the College Annex, and a new Anatomical Laboratory is being fitted up for it.

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Session of 1910 opens Tuesday, September 27.

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New Jersey Osteopathic Society: President, Dr. D. H. W. Cranberry, Orange; vice-president, Dr. Andres Hassing, Camden; secretary, Dr. F. J. Larrabee, Orange; treasurer, Dr. Hardy W. Carlile, Paterson.

Northwestern Missouri Osteopathic Association: President, Dr. Geo. J. Conley, Kansas City; vice-president, Dr. E. J. Mavity, Nevada; secretary, Dr. Bertha Whiteside, Kansas City.

Ohio Osteopathic Society: President, Dr. A. W. Cloud, Canton; vice-president, Dr. Lucy A. Lees, Akron; secretary, Dr. E. F. Conner, Dayton; treasurer, Dr. W. S. Pierce, Lima.

Ontario Osteopathic Association: President, Dr. E. B. Henderson, Toronto; vice-president, Dr. J. S. Bach, Toronto; secretary, Dr. E. D. Heist, Berlin; assistant secretary, Dr. F. D. Mear, Toronto; treasurer, Dr. J. N. McKee, Galt.

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Philadelphia County Osteopathic Association: President, Dr. Arthur M. Fleck; vice-president, Dr. W. S. Niell; secretary, Dr. Cecilia C. Curran; all of Philadelphia.

Rhode Island State Osteopathic Association: President, Dr. A. W. Rhodes, Providence; vice-president, Dr. H. M. Hutchins, Providence; secretary-treasurer, Dr. W. F. Weir, Pawtucket.

Sacramento Valley Osteopathic Society: President, Dr. W. D. Brand, Davis; vice-president, Dr. P. V. Aaronson, Fresno; secretary, Dr. H. R. Miles, Sacramento; treasurer, Dr. C. A. Haines, Sacramento.

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Southern Kansas Osteopathic Association: President, Dr. M. J. Bests, Wellington; vice-president, Dr. J. G. Strothers, Wurford; secretary-treasurer, Dr. F. M. McCoy, Wichita.

Southwest Missouri and Southeast Kansas Osteopathic Association: President, Dr. W. J. McPherson, Joplin; vice-president, Dr. F. M. Geissin, Lamar; secretary-treasurer, Dr. Francis Wolfe, Carthage, Mo.

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The Passive Pressure Appliance is indispensable in all acute diseases, and will, when properly used, secure results in many chronic ailments where manual treatment alone is ineffective.

The Passive Pressure Appliance will enable you to hold and cure many patients who otherwise would discontinue treatment before giving osteopathy a fair trial.

Every osteopath in general practice, who has the welfare of his patients as his chief purpose, will add to his professional equipment Galbraith's Passive Pressure Appliance.

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75 West Houston St., New York City

GALBRAITH'S PASSIVE PRESSURE APPLIANCE

(Pat. Sept. 7, 1909)

Will save many a patient for you who might, in your absence, depend on drugs or an M. D. for relief.

The Passive Pressure Appliance is indispensable in all acute diseases, and will, when properly used, secure results in many chronic ailments where manual treatment alone is ineffective.

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DR. WM. OTIS GALBRAITH, 517 Weightman Bldg., Philadelphia.
**Why He Did It.**

"Why do you make the patient wait three hours every day in your anteroom?"

"He needs rest," exclaimed the doctor, "and that is the only way I can compel him to take it."—Cour intelligent Journal.

**Might Find It Useful.**

"Most absent-minded man I ever knew. Went to town one day and forgot to bring his wife home."

"Doctor?"

"Yes."

"Could that brand of absent-mindedness be acquired?"

Diagnosed.

"Sure, and you had the doctor to see your husband, did ye?"

"Yes. He gave him a bottle of ephedrine and a can'till."

"Begor! It's hydropathia he has, I guess!"

**No Help for the Hype.**

Hypo—Oh, doctor! I have a terrible pain here in my left side.

Doc—Cheer up; that's too low to be in your heart.

Hypo—But I fear it is appendicitis.

Doc—Nonsense! The appendix is on the right side.

Hypo—But, doctor, I'm left-handed.—Cleveland Leader.

**Disinterested Suggestion.**

"What did you say to the policeman who arrested you for speeding?" inquired the friend.

"I told him I was going after a doctor," replied Mr. Chinga.

"Did he believe you?"

"I don't think so. He said that if I didn't want to pay a fine I'd better change my mind and go after a lawyer."—Washington Star.

**Which Is It?**

"Father."

"Well, what is it?"

"It says here, 'A man is known by the company he keeps.' Is that so, father?"

"Yes, yes, yes."

"Well, father, if a good man keeps company with a bad man, is he a good man bad because he keeps company with the bad man, or is the bad man good because he keeps company with the good man?"—Punch.

**THE OSTEOPATHIC PHYSICIAN**

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Be up-to-date—not twenty years behind the times in the usage of the Language. One can be ignorant on many subjects and still be educated in the correct usage of language commands the respect of all and means inculcation of that which is good, and wisely so, long as their pockets are full, as in any other profession or business. The material that Dr. Barnesby has collected is effective only against the criminally and negligently inclined in the medical profession. He makes the same mistake in his charges that the medical men make in their defense. He groups them all together, the good and the bad, and accuses all indiscriminately for the crimes of the—we hope we are right in saying, the few, though Dr. Barnesby does not think so. But so long as the medical profession has the same fault, and elects to stand or fall as a unit, there is no choice in Dr. Barnesby's

**D.O.'s! Investigate This!**

**HERE** is a common predisposing cause of spinal irregularities.

Thousands of women spend hours at the sewing machine. The false posture necessitated by the old side needle machine is a severe strain on a strong spine; a positive menace where there is any natural weakness. Many of your women patients with whom you are having difficulty in treating some spinal lesion may be constantly aggravating the condition by operating a sewing machine in a twisted, abnormal position.

**THE NEW STANDARD CENTRAL NEEDLE SEWING MACHINE** is built so as to enable the operator to sit with the back straight, in an easy, natural position. It is a thoroughly high grade machine and costs no more than other standard makes. An unprejudiced investigation will convince you that it is worthy of your hearty recommendation and endorsement.

**We shall be pleased to send you literature**

The Standard Sewing Machine Co.
No. 6462 Cedar Ave., Cleveland, Ohio
position. All become partners in an abuse that they defend, or countenance. Crime, ignorance, indifference, error, in the medical profession is magnified a thousand times in relative damage and violency by the fact that it is the medical profession. Those who have the care of our bodies, lives, health, efficiency, an error with them is a hundred times an error.

Therefore it should be particularly well guarded against. The good and noble among them should try to effect some safeguard. They have done nothing but raise the standards of entrance to the profession. But this would not be in any way consistent with the theories inside that much more strongly fortified in their practices; and education is no barrier to criminal or incompetent or indifferent attitude of medical profession. This is as true as a probable supercilious, unsympathetic, even stubborn frame of mind. For instance: instead of taking warning from the numerous cries, now growing to be a clamor, against abuses in the medical profession, they one and all turn to self-defense, and even dare to ask for political power to silence their critics.

Much of this is due to the fact that the really worthy among them are very busy with the tremendous problems that face them. They desire immunity for mistakes and from the power of the doctor, the better who can face these problems; but moral attitudes are always an issue, they are always the first issue, and no amount of eagerness to investigate and disprove will wash away the existence of the moral issue. Those who honestly desire this leisure must see to it that the dishonest do not fall in behind them and, protected by the bulwark of their integrity, graft upon the public.

"Those whom the Gods would destroy, they first make mad." The medical profession, blind to the voices that were raised against the abuses thereof, within and without their ranks, blind to the popular reverie against drugging, blind to the advances in knowledge and method that are being made outside of their regular ranks, seem to be approaching this madness. There are those who say that it is even a blood madness, in the making of the abuse to appear December 1st. A. Wakeham, showing the good work being done through that clinic, and requesting

We had an order in for a New Doctor, but received a message, saying: "The M. D.'s have a corner on all the boys at present, you osteopaths may come up strong and in time you too will get your share; at treatment all you can get is a nurse."

Elizabeth Alice Blair, born Friday morning at 6:45 a.m., November 1st. Strictly osteopathic baby. Weighs eight pounds stripped, all fine and dandy.—Raymond S. Blair, D. O., Parkersburg, Iowa.

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The matter of osteopathic entrance into the Los Angeles County Hospital, also a series of resolutions adopted the change of name. The society has made the publication of the book the press of the country has been quite full of this kind.

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Central Ohio Osteopathic Society.

Twenty practitioners of central Ohio met in the office of Dr. R. A. Sayre, Columbus, Monday night, November 14th, and organized the Central Ohio Osteopathic Society. The society is in accord with the principles of ethics of the American Osteopathic Association and proposes to co-operate with the state and national organizations. Meetings will be held in December; the results made to organize the fifty or sixty practitioners of central Ohio. Officers elected were: President, Dr. L. A. Rumstead, Delaware; vice-president, Dr. J. H. B. Scott, Columbus; secretary, Dr. B. H. T. Becker, Columbus; treasurer, Dr. Ellef Koons, London.—B. H. Tatum, Bechard, D. O., Secretary.
Osteopathy in Emergency Cases
Theme of January Osteopathic Health

Nothing demonstrates truth to the multitude so vividly as results. Your theories and facts may agree, but unless you can show up results, you will not hold the allegiance of any considerable following. It is because osteopathy so consistently shows definite results when its theories are put into practice that it has so rapidly won and so tenaciously holds the confidence of the public.

The January number of Osteopathic Health applies this idea to our popular publicity literature. It is a record of results. Cases taken from actual practice are related, describing the procedure of the osteopath, why he did what he did, and the outcome. It makes mighty interesting reading and will prove especially absorbing to those suffering from any of the ailments mentioned, and because of the number of different cases quoted this issue of Osteopathic Health will be of wide usefulness to every osteopath.

These little stories from life are really the most convincing testimony that can be adduced in support of osteopathy, and they can every one be verified should any question be raised. Of course, no names, or even dates are mentioned in the magazine, but we have the facts just the same. The titles of the various anecdotes are:

- Kidney and Intestinal Paralysis from Spinal Concussion.
- Pernicious Coughs Following Surgical Operation.
- Acute Intestinal Cramps.
- Collapse from Surgical Shock During Laparotomy.
- Profuse Uterine Hemorrhage.
- Lumbago in a Middle-Aged Man.
- Acute Appendicitis Without Operation.
- Altered Sexual Function of the Knee Joint.
- Paralysis of an Infant from a Fall.
- Typhoid Fever with Enlarged Heart Complications.
- Acute Lobar Pneumonia in a Child.
- Bright's Disease.
- Slipped Rib and a Cough.
- A Fracture of the Elbow.
- A Crick in the Neck.
- A Sprain of the Foot.
- Apoplexy.
- A Child in Coma from Spinal 'Deadlock.'
- Continuous Vomiting as a Result of Surgical Shock.
- Ear Pains and Threatened Mastoiditis.
- A Broken Collar Bone.
- Infant Dying of Spinal Congestion and Drugging.
- A Dislocated Knee Cap.

If you are anxious to get something that will awaken a deep and lively interest in osteopathy and compel even the skeptical minded to give it serious consideration, this January number of Osteopathic Health into the hands of the people of your community. It cannot fail to do the work. It is actual life experience, so condensed and so simply stated that it can be read in a few moments and instantly comprehended by those of even limited education.

This record of the triumph of osteopathy when put to the test is something every osteopath should be proud to circulate.

Central College of Osteopathy
Established 1903

- Our grounds and buildings centrally located; best college location in the city.
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Some Bouquets from Friendly Boosters

"The cover design of the Christmas number of Osteopathic Health is a beauty. Best wishes to you."—Dr. J. C. Twitchell, Corvallis, Tenn.

"The December number of Osteopathic Health is one of the best ever published, as it is the best ever. I tell you, I shall enjoy sending it to my patients and friends."—Dr. Charles A. Osborn, Salt Lake City, Utah.

"The Christmas number of Osteopathic Health is a good one and I think the cover is exceedingly pretty. I shall enjoy sending it to my patients and friends."—Dr. W. G. Hamlin, Chicago, Ill.

"I am in receipt of the December number of Osteopathic Health and like the cover and contents very much. It is attractive."—Dr. Harry C. Osborn, Salt Lake City, Utah.

"You are putting out dandy issues of Osteopathic Health these days. The number and December issues are hard to beat, I tell you."—Dr. Ruth M. Wright, Charles City, Iowa, November 29th.

"Please send me four hundred copies of Osteopathic Health for December, the Christmas number. It is certainly a good issue, which speaks up in both appearance and as to contents. Please accept my congratulations on your good work for a grand finish for 1919."—Dr. W. C. Boyer, Peoria, Ill., November 28th.

"I regard the December number of Osteopathic Health, the Christmas edition, the best written number yet published."—Dr. G. S. Housting, Pendleton, Ore., November 24th.

"The December number of Osteopathic Health, the Christmas number, is the best I have ever received, as it explains the lesion in regard to osteopathy more clearly than anything previously published."—Dr. George W. Goode, Boston, Mass., November 25th.

"It is really a pleasure to send Osteopathic Health to any of my friends. The last two numbers have been much good enough."—Dr. Mary E. Ferretti, Vermonton, S. D., November 28th.

"My practice has been so great I thought it would be suicide to use your literature, but could not resist the temptation of this excellent Christmas issue."—Dr. J. D. Miller, Morgantown, W. Va., November 28th.

"The Christmas number of Osteopathic Health is here and I have read it from cover to cover. The introduction of diets scientifically digested and yet intimate enough to be almost personal. The remainder of the number is equally useful and the contents on mechanical grounds. In fact, I like the whole thing very much and consider it as the best number which is yet published. I am an osteopath."—Dr. Corrine E. Larmire, St. Joseph, Mo., December 7th.

Dr. Jenness D. Wheeler, of Malden, Mass., has been afflicted with the paralytic rheumatism for a couple of nights or so. She is spending the winter in Sarasota, Fla., with the hope that it may prove beneficial to her health.

Dr. A. J. and M. H. Olmsted have removed from Belle Plaine, Iowa, to Topeka, Kansas. They are temporarily out of practice, Dr. A. J. Olmsted having a strategic position to visit.

Dr. Mary Pittman has given up her practice at Aberdeen, S. D., and after a short visit in Minneapolis will go to Boston, Mass., where she will reside while attending her studies on the subject course.

Dr. D. I. Reynolds, of Fayette, Mo., has given up his practice at that place and will locate at Omaha, Neb.

Dr. Roy L. Starkweather, A. O. 1904, has purchased the practice of Dr. O. L. Butler at Atlantic City, N. J., and is located in the McCroye apartments, corner of New York avenue and the Boardwalk.

Dr. T. Simpson McCall, of Enid, Okla., is just recovering from a two weeks' confinement to his home as the result of an automobile accident. His machine collided with a wagon, with the result that the doctor secured a badly injured right hand.

Dr. W. B. Bond of the S. S. Still College, 1902 class, is now associated with Dr. Warren B. Davis at Rolla, Mo., to be the most up-to-date building in the town. He says (especially the above books were published).

An editor without the peculiar talent necessary for work of this kind, must fail to meet the true measure of success. In addition to this faculty, one must have the experience which assures the right application of the talent. Dr. Gould, the greatest medical lexicographer of the times and author of the big dictionaries mentioned above, possesses these attributes in the highest degree; consequently, the Practitioner's Dictionary should meet the task which to a critical mind would expect it to conform.

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The Practitioner's Medical Dictionary was compiled with the addition of desirable terms that had been omitted from the previous edition. The dictionary is arranged in alphabetical order, and the term is defined as accurately as possible. The dictionary is a valuable tool for the osteopathic physician, and is highly recommended for its accuracy and thoroughness.

P. Blakiston's Son & Company Publishers
1812 Walnut Street, Philadelphia

MAN-WOMAN-KNOW YOURSELF

By PERCY H. WOODALL, M. D., D. O.
SECOND EDITION

A Manual of Osteopathic Gynecology

By BERTHOLMESTER, 1861 CITY ST., CHICAGO

515 First National Bank Building
BIRMINGHAM, ALA.

Dr. Florence P. Strockell, from Germantown to 1116 Washington, Kansas, Utica.
Dr. Oscar Van Osol to Girard, Kan.
Dr. Lydia H. Wright to 200 Westchester street, Providence.
Dr. H. J. Kaiser at Lowendes building, Atlanta, Ga.
Dr. Ids 8. Pimpl, from Coblentz, N. Y., to Simekville, N. J.
Dr. Charles Arrand, from Kingsley building, Sandusky, Ohio, to Marysville, Kan.
Dr. R. M. Cooper, from Lawrence to Garden City, Kan.

THE OSTEOPATHIC PHYSICIAN

PUBLISHED OCTOBER 28, 1910

The Practitioner's Medical Dictionary

By GEORGE M. GOULD, A. M., M. D.
SECOND EDITION

Octavo XXI, 1043 pages. Full limp morocco, gilt edges. Round corners. $4.00, thumb index, $4.50 net.

The PRACTITIONER'S DICTIONARY is the standard of what a general practitioner's dictionary should be. It is based on the "Illustrated Dictionary of Medicine, Biology and the Allied Sciences" and the supplement "Pathology". The volume, which combined, contain about 118,000 words. From this vast number the PRACTITIONER'S DICTIONARY has been compiled, with the addition of desirable words that have come to life since the above books were published.

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For Sale—Well established practice in city of 5,000; only D. O. in county; will give possession immediately. Terms, cash. Address 297, care The O. P. Co., 191 Market street, Chicago.