HOW DID YOU TREAT YOUR "FLU" CASES?

The OP's Follow-Up Questionnaire is designed to supplement the invaluable statistical data of epidemic results now being collected by the AOA. This Questionnaire deals with methods. It is to disclose how our patients were treated.

Please answer as many of these questions as you can and send your data to The OP for prompt printing and compilation into general articles in order that the whole profession and mankind may profit.

1. What kind of lesions were found?
2. Where were they?
3. How were they corrected?
4. What general manipulations were given for bedside treatment?
5. What was the average time used per patient for osteopathic treatment?
6. How frequently were patients treated?
7. Did you find it easy to over-treat your cases?
8. How many days were patients under treatment?
9. Did patients who had been drugged respond as well as others to osteopathic treatment?
10. What regulation of diet was prescribed for Influenza alone? Pulmonary complications? Bowel and stomach complications? Nervous complications?
11. Did you use any substances like Antiphlogistine, Dionol or other local applications? If so, what?
12. What methods were used to keep the bowels active?
13. What method used to keep kidneys active?
14. Did you sweat the patient? If so, how and at what stage of disease?
15. Did you use cotton jacket for pulmonary complications?
16. What about ventilation, that is, much or little?
17. What was average temperature of room?
18. Were any means used to reduce temperature of patients? If manipulation, where, what kind, and how applied?
19. Were any means used to overcome cough? If so, what?
20. Were any means used to stimulate the heart?

Blanks of the above will be furnished gladly upon application.

Please be prompt in your response.

Henry Stanhope Bunting, Editor The OP
9 South Clinton St., Chicago

OSTEOPATHIC FLU-PNEUMONIA STATISTICS

<table>
<thead>
<tr>
<th>Flu Cases</th>
<th>Deaths</th>
<th>Percentage</th>
<th>Pneumonia</th>
<th>Deaths</th>
<th>Percentage</th>
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</thead>
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<tr>
<td>81,997</td>
<td>205</td>
<td>0.25%</td>
<td>4,870</td>
<td>468</td>
<td>9.6%</td>
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</tbody>
</table>

The number of Physicians reporting to date is 1,876.
$6,000 Raised by "Tag Day" for Chicago Osteopathic Hospital Children's Ward

A "TAG DAY" for the benefit of the Children's Ward of the Chicago Osteopathic Hospital was held on March 24th. Five hundred friends and boosters of osteopathy acted as "taggers" in the "Loop" and at outlying points in the city to date the tags.

Identified with the work of the Chicago Osteopathic Hospital is an enthusiastic group of women, representing the ladies, organized by Dr. Nettie M. Hurd, and known as the "Women's Board." The membership of this organization is made up entirely of friends of osteopathy. No proposition is too big for them. They are all earnest workers. Less than one year old, this organization has donated many hundreds of dollar's worth of linen, silver and silver plate to the hospital and during the influenza epidemic the members volunteered as nurses to care for the patients, made surgical dressings, masks, etc.

The early last evening tag days were so popular in Chicago, the Woman's Board decided that the Chicago Osteopathic Hospital should appeal to the city and hold a tag day. Dr. Ernest R. Proctor and his secretary, Miss Ethel New, made the first advance by interesting a patient's mother who was asked to act as "tagger" in the mayor's office. His reply gave the necessary information as to further proceedings. Every "Politely Refused" card was solicited to gain the consent of the city council to move by the mayor for this privilege. Finally on March 24th the Woman's Board was notified that Monday, March 31st had been set aside by the city council as "City Wide" tag day for the Chicago Osteopathic Hospital. A "City Wide" tag day, meaning the permission to sell tags on all streets in the city with police protection, is a concession granted to but few local institutions and seldom to a single institution. The women at the Chicago Osteopathic Hospital are trying to include several charities in the one tag day. The action of the Chicago city council, in this respect, is fully appreciated by the Woman's Board of the Chicago Osteopathic Hospital and by the osteopathic profession of the city generally.

The time in which to organize was short—only seven days—but the opportunity was too great to lose. The undertaking was placed in charge of the Woman's Board Tag Day Committee, Dr. Nettie M. Hurd, Mrs. T. S. Comstock, Mrs. O. C. Foreman, Mrs. A. C. Culley, Mrs. E. A. LaRochelle, with the aid of Mr. W. Frank Powers, a senior student, as Lt. captain. The city council, the board of trustees of the College of Osteopathy, under the able leadership of Miss Bessie Bell Johnson, a freshman; the trustees and medical staff of the hospital; members of the profession; patients and friends; co-operated in every way toward success.

Through the kindness of Dr. Carl G. Winslow in loaning one of his rooms, headquarters were established in the Goddard Building. This afforded a central location for distribution of tags, boxes, supplies, etc. Tin tag boxes were donated by the Urban coffee people.

The city was mapped out in districts, captains appointed, and the rush continued day and night to get the tags sufficient to cover the main points. The response was remarkable. Information was received that many public spirited, influential men had not acted at various tag days during the year, but had been acquired as captains in certain localities, hotels, public buildings, etc., with their own workers. These women did not know what to do about Mattox, but felt that as the city council had upheld our request in such a large way, they wished to be identified with it and their response was most cordial.

This appeal resulted in a sale of 122,000 tags, which was one of the big features.

Newspaper items appeared in the various daily papers, through the efforts of a special reporter employed by the Chicago Osteopathic Examiner. A young man to the hospital to photograph the children and soldiers under treatment there. Illustrations from these photographs appeared in the Examiner.

The weather was very disagreeable on March 31st, but notwithstanding, six o'clock in the morning found five hundred enthusiastic women at their corners with tags and literature, and smiles to exchange for the contributions put in the boxes. They were all so eager to sell tags that they forgot the weather for hours, and their faces were stiff and blue with cold. They refused to go inside, for each wished her box to be the richest. Many interesting tales are told by the tappers, of questions asked by the public about osteopathy, some persons saying, "Another fake"; others guessing it a new religion. Several M. D's. are now wiser in regard to the extent of the training in our osteopathic colleges; the requirements upheld for matriculation; and the success of the Chicago Osteopathic Hospital. That the Chicago Osteopathic Hospital could make an appeal to such an institution was news to them. This tag day was surely one of the biggest advertisements in an educational way that osteopathy has enjoyed in many a year. Several patients have come to the hospital this week as a result of it.

As a guard against any undeserved criticism, the OP always argues that such a thing as the "business management of research" never existed in fact any more than a poet laureate or vory where animals and other creatures from whom it will be checked out by voucher.

A. T. Still Research Institute Sells Its Chicago Property at a Profit

That this was absolutely true was quickly proved by the fact that only the garage on the rear of the lot was fitted up and used as a laboratory. This experimentation went on, while the big pretentious house was used for sleeping quarters for the staff and as an office for the "business administration" of research.

The OP always argued that such a thing as the "business management of research" never existed in the scientific world or in any institution that needed or could abide a "business management" sitting astride his neck and directing the production and direction of the outpourings of genius. Well, we have now had some years of "business administration" of research and what did it accomplish for research? All the personal sacrifice and hard work done in that direction availed nothing for research that we can see.

If research is ever to be done for our field it must be done—as we have insisted from the outset—by qualified researchers, who do not need direction, working untrammeled and without any guidance or restraint but the inspiration that is fathered by genius and mothered by technical training. If you don't get this idea you do not understand the nature of research. There is no other way.

As The OP has printed at various times, what the A. T. Still Research Institute needs to do with its money is to keep it permanently invested in safe and productive securities and use the income to do actual research. It should save all the overhead outlay that it takes to run any kind of business—quarterly and annual statements, books, accounting, or conduct a publishing enterprise, or conduct school classes, etc., and should have nobody actively connected with the establishment, but qualified technicians, each able to work unmolested, chasing the mysteries of his own fancy in his own special line of investigation. If the profession's experience has not made us all of one mind as to the wisdom and necessity of such a course, then it means only so much further delay of the era of actual productive research. Men and women able to do research do not have to be directed, and there is nobody able to direct them, in the way who is a pastmaster in research science himself.

We have only lost a little time and may have learned the lesson by experience, which is a good teacher. Let us get right next time. A routine factory laboratory for research workers would be a small inexpensive building or a second story loft with good light, air, space enough for various laboratories, good ventilation to carry off poisonous gases, plenty of ground to keep the animals in, and dry cellars and storage rooms. The Society F. T. P. O. C. to A. Such quarters
Mechano-Therapeutist Treated Florian Miller—Not An Osteopath

In the daily papers of Chicago, March 25th, there appeared a news item stating that "Florian Miller, suffering from paralysis, said to have resulted from dislocation of his neck while taking osteopathic treatment for a cold eighteen months ago, died yesterday at the county hospital." Dr. H. W. Fryette, president of the AOA, and other Chicago osteopathic physicians, immediately got busy and discovered that Florian Miller was not treated by an osteopath, but by a man named L. W. Miller, claiming to be a "mechanotherapist."

Mr. Perry S. Patterson, attorney, was sent to the inquest and obtained a complete stenographic report of the testimony. It was brought out at the inquest that L. W. Miller was not a licensed practitioner of any sort; that he held only diplomas from mechanotherapy and chiropractic schools; that he admitted he knew nothing about osteopathy and the trial with most wonderful success, and yet this osteopath does not wish to tell the story of that great achievement to his patients! How sadly shortsighted!

Every osteopathic physician in the world should be spreading broadcast the facts about osteopathy's great triumph in the flu-pneumonia test, regardless of whether his practice is exclusively among "chronic" patients or otherwise. Placing the facts of his situation before the people will bring more "chronic" patients to osteopathic offices than anything previously said or done to herald the merits of osteopathic therapy.

We congratulate the research trustees on getting rid of their fancy house and grounds and upon being able to unload their investment at a profit of $4,000. It might have been a whole lot worse.

Bozeman to Be Location of Osteopathic Hospital to Be Built by Montana Osteos

THE OSTEOPATHIC PHYSICIAN

Bozeman to Be Location of Osteopathic Hospital to Be Built by Montana Osteos

[From the Bozeman (Mont.) Weekly Courier, March 19th]

T HE following letter shows an attitude which unfortunately is typical of some osteopathic physicians who should have a broader vision:

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WASHINGTON, April 4.—Charges of gross negligence and direct responsibility in con­

trolling and spreading the spread of typhoid and paratyphoid fevers in the army are made

against many medical officers serving with the forces overseas in a circular published by the

chief surgeon of the American expeditionary forces and made public here today by the public

health service. The circular says: "With a warning that vaccination does not give complete

immunity from typhoid.

Surgeon Cites Instances

The chief surgeon cites many instances where epidemics prevailed among troops, especially
during the last offensives on the western front, and points out that the occurrence and dis­

tribution of diseases was constantly brought to the atten­

tion of the medical officers thru weekly bulletins.

"It would appear," the circular continues, "that many

officers utterly failed to grasp the sig­

nificance of these reports and warnings, a fact

which may be due to a false sense of security under

the popular belief that vaccination against typhoid and paratyphoid gives complete immunity even in the midst of gross insanitary conditions.

"Notwithstanding the fact that typhoid and paratyphoid fevers are epidemic in the United

States and in spite of our extensive experience with these diseases during the Spanish-American war and later during the period of mobilization on the Mexican border, it is evident that many

medical officers have gained but little knowledge of the fundamental principles underlying preven­
tion and control. It is also quite evident that some medical officers are grossly careless and

neglectful of their duties and responsibilities as medical officers and sanitarians."

Conditions Cause Laxity

It is fully recognized, the circular says, that conditions brought about by the mobilization of

millions of men, the active participation in the war of 2,000,000 of them have at times made

sanitary control extremely difficult, especially during the stress of active combat.

The high standards of sanitation and personal hygie­

ne set by the army medical department during the

preceding decade, it adds, were not lived up to by the last year and a half. As a result of this, and to a combina­tion of factors, the more important of

which was the lack of facilities and material trans­portation, the difficulties and insufficient train­

ing and personnel.

"However," the circular continues, "many med­

ical officers serving with combatant and S. O. S.

units have been unable to overcome all handicaps, and have by wise counsel and eternal vigilance

succeeded in keeping their units in excellent fight­ing trim."

The chief surgeon warns his subordinates that now the excuse, "There is a war on," no longer

applies. The time has come for every man in his unit, from the chief surgeon on down, to be held

responsible for proper supervision of the health of his soldiers.

In a brief review of the occurrence of typhoid and paratyphoid fevers and diarrhea among the forces, the chief surgeon says that until June, 1915, few cases developed and the rate was within the expected and normal range. However, it appears the diseases spread thru many units.

Seventy-Five Per Cent Affected

During the Chateau Thierry offensive, the circular discloses, approximately 75 per cent of the troops were affected with some form of intestinal disease, such as simple diarrhea, bacillare, dysentery, typhoid and paratyphoid.

"The high evidence of intestinal diseases in the sector," the chief surgeon says, "was due to entire disregard of the rules of sanitation."

Both dysentery and typhoid and paratyphoid fevers were demonstrated to have prevailed to some extent after the St. Mihiel offensive, but the epidemic of typhoid was demonstrated to have prevailed to a greater extent after the St. Mihiel offensive, but the epidemic of typhoid was prevalent to a greater extent after the St. Mihiel offensive, but the epidemic of typhoid was prevalent to a greater extent. The unit had been vaccinated a few months before the epidemic.

The chief surgeon declares that in many in­

stances patients, some of whom were wounded, passed successively thru camp, field, evacuation and base hospitals without any documentary evidence that they were infected. The unit was vaccinated a few months before the epidemic. The chief surgeon says that until June.

The chief surgeon warns his subordinates that there was "nothing doing." Finally a son of the

man said he had seen a case which was cured in thirty days by having the patient "stand on his head." So we had him lie on the floor on his back and raised him up by his feet and at the same time massaged his stomach. The hiccough stopped instantly! It has worked like a charm on the

three patients so far. I pass it along for what it is worth.—W. E. Paul, D. O., Mound City, Missouri.
An Eminent Body of Educators Comprise the Faculty of The College of Osteopathic Physicians and Surgeons

LOS ANGELES

CALIFORNIA

Of prime importance to the success of an educational institution are the character and ability of the teaching staff. The faculty of The College of Osteopathic Physicians and Surgeons has been developed by careful, intelligent selection until today it represents a teaching body in which every member is distinctively fitted for his task. The native ability of the student is thus given every encouragement.

Faculty Members—Their Qualifications and Subjects:

HARRY WILLIS FORBES, D.O., Columbian School of Osteopathy, Kirksville, 1900; Post Graduate Dr. S. S. Still College of Osteopathy, Des Moines, 1901; Instructor in Anatomy, Columbian School of Osteopathy, 1898-1899; Professor of Anatomy and Pathology in same, 1901; Professor of Osteopathic Medicine, Dr. S. S. Still College of Osteopathy, 1901-1905; President, Los Angeles College of Osteopathy, 1902-03. Teaches Osteopathy—Principles, Nervous Diseases.

CARLE HARVEY PHINNEY, D.O., Pacific College of Osteopathy, 1901; Professor of Anatomy and Physiology, Pacific College of Osteopathy, 1901; Professor of Applied and Surgical Anatomy, same, 1902-04; Student in Chemistry and Food Analysis, University of California, 1901. Teaches Physiology and Biology.

JENNIE CONNOR SPENCER, D.O., Dr. S. S. Still College of Osteopathy, 1902; Post Graduate Pacific Hospital Clinic, Gynecology and Obstetrics, under Byford and Garrigue, 1903; Professor of Gynecology and Obstetrics, Dr. S. S. Still College of Osteopathy, 1902-05; Professor of Gynecology and Obstetrics, Los Angeles College of Osteopathy, 1902-14. Teaches Gynecology.

ROBERT DUDLEY EMERY, D.O., Pacific College of Osteopathy, 1899; D. Sc. O., Pacific College of Osteopathy, 1901; Post Graduate Study at New York Post Graduate Medical School; Allgemeines-Frankenhaus, Vienna; Queen Charlotte's Lying-in Hospital; New York Lying-in Hospital; Work in Clinics of Vienna, Munich, Berlin, London, Liverpool, Glasgow, etc. Professor Chemistry, Pacific College of Osteopathy, 1900-04; Professor of Orthopedic Surgery, Pacific College of Osteopathy, 1900-04; Ex-president California State Board Osteopathic Examiners. Teaches Abdominal Surgery.

JOHN ORDWAY HUNT, D.O., Pacific College of Osteopathy, 1902; Post Graduate Pacific College of Osteopathy, 1907; Professor of Osteopathic Technique, same, 1902-14. Teaches Curvatures and Osteopathic Technique.

LILLIAN McKENZIE WHITING, D.O., Pacific College of Osteopathy, 1903; Post Graduate same, 1907; University of Utah, 1898-99; Stanford University, 1898-99; Post Graduate Courses, New York Post Graduate School and Hospital, 1906; Morgan Lying-in Hospital, 1906; Courses in University of Vienna, Austria, 1901; Clinical Courses, Great Ormond Hospital, London, 1902; Professor of Obstetrics and Dermatology, Pacific College of Osteopathy, 1907-14. Teaches Obstetrics.

Other Members of the Faculty, with their subjects and qualifications, will be given in a later announcement.

The Los Angeles Emergency Hospital is open to students of The College of Osteopathic Physicians and Surgeons. Senior students are on duty in four-hour shifts during sixteen of the twenty-four hours daily. Students go with the ambulance and assist in the care of every variety of accident. During the last year 27,921 people were treated at this hospital.

Osteopathic principles and technic are thoroughly and comprehensively taught and demonstrated. Graduates from this college prove themselves a credit to osteopathy in practice. For further information and catalog address

Dr. R. W. BOWLING, Dean

300 San Fernando Bldg., Los Angeles, Cal.
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Henry Lindlahr, M. D.

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Chicago, III.

From Cantaloupe Suzette to Perry S. Patterson

THE committee in charge of the banquet for the American Osteopathic Association, to be held at the Hotel Sherman, Louis XVI room, on July 2nd, 1918, reports splendid progress, and promises that this shall be the finest affair of its kind ever given. The following menu has been arranged for:

Cantaloupe Suzette
Mixed Olives
Essence of Tomato, Doria
Cold Deux de Saumon, Troust, Parisienne
Salade Fantaisiere
Breast of Guinea Hen, Virginia
Roast Fresh Mushrooms
String Beans au Gratin
Cold New Asparagus, Vinaigrette

Dr. Plymouth Rock en Route to the Best Convention Yet

There will be flowers and music during the dinner, to be followed by a most excellent program:

Address—Kenesaw Mountain Landis, Judge of the Federal Court, U. S. A.


Address—Hon. Frank O. Lowden, Governor, State of Illinois.

Toastmaster, Perry S. Patterson.

The Osteopathic Service League

[From the Florida Osteopath]

[From the Missouri Osteopath]

HE Osteopathic Service League is the imposing title of the official lay movement in osteopathy. The charter has been secured under the laws of Illinois and organization will be pushed to completion early in 1918. Details of the league and its proposed activities will be published as speedily as received from headquarters. Briefly, the league is to be a tangible connection between the profession, and the public, and as organization of laymen with osteopathic sympathies and high ideals for the advancement of osteopathy in every sphere of educational and therapeutic activities. Pending further organization, the officers and trustees of the league are as follows: President, Dr. Carl P. McConnell, Chicago; treasurer, Dr. Irene Harwood Ellis, Boston; executive secretary, Dr. Francis A. Cave, Boston; trustees, all of Chicago, Perry S. Patterson, H. J. O'Donnell and Dr. Earl J. Drinkall.---March issue.

[From the Florida Osteopath]

I have reread your letter of September 18 several times, also the copies of 'Super-Health,' the "Missouri Osteopath," and the Questionnaire, which you enclosed. I can only say that I wish we had a thousand men like you in our profession. We would then sweep the decks so clear of the drug curse through the agency of popular health education that a pill doctor would not dare to prescribe the stuff! Many medical men have told me they would not give so much medicine except that the public demanded it. So our crusade certainly must be intensive popular education along health lines.

Enclosed herewith is a revised outline of the objects and purposes of the league, formulated with a view to the permanent character of the organization. Will you help me to realize these things for the profession by becoming a member of the committee on organization? I await your early response with interest.

With all good wishes for your health and happiness, I remain,--Sincerely yours, Francis A. Cave.

Dr. Plymouth Rock en Route to the Best Convention Yet
In the Doctor's Office

a reliable germicidal agent is continually being required. For a good many years peroxide of hydrogen has been the most generally and extensively employed antiseptic in office practice.

Experience has shown, however, that ordinary peroxide of hydrogen is open to wide variation. Most physicians, therefore, in recent years have used and recommended Dioxogen, a peroxide of hydrogen that they have come to prefer because they have found it to be superior to any other in its purity, stability, antiseptic power, and freedom from toxic or irritating action. Dioxogen, moreover, is odorless and colorless, properties which greatly increase its value for office use, since it can be employed without leaving any smell, or staining the dressings or clothing. Finally, Dioxogen has marked hemostatic properties which often materially add to its usefulness in the treatment of emergency wounds.

Dioxogen is unquestionably the most widely used germicide in office work today. This is merely the logical consequence of the fact that no other antiseptic is so satisfactory in every respect—so efficient in action, so cleanly to use, so free from all objectionable or disagreeable effects.

THE OAKLAND CHEMICAL CO.

10 Astor Place, New York
Dr. S. D. Stephenson Hatched a Great Idea

I HAVE not received my March number of The OP and have wondered if you still have me on your mailing list. I belong there permanently. I have been thinking of suggesting a proposition that it seems to me you folks would be in fine shape to carry out. The idea is this: In looking over various reports of the "flu" epidemic I found none that gave any mention as to how they treated cases, that is, doctors merely stated a certain number of cases were treated osteopathically with a certain percentage of failures and a certain percentage of cures. Now, it must be, considering the number of osteopathic physicians there are in the field, that there would be some variation as to treatment and opinion relative to the different stages, kinds and degrees of treatment and complications of influenza.

The chief objections I have heard advanced against osteopathic treatment are that it exposes the patient too much, or that it exerts the patient too much, etc. These objections, of course, are made by people who are unaccustomed to osteopathic methods.

I would suggest that you arrange a questionnaire form to be filled in and send one to each of your subscribers asking them to cover treatment, diet, general care, etc., of influenza patients. Request each doctor to fill in the form sent him and return it to you. You could then classify them, print the collected results and samples of each classification. It surely would be a help to many practitioners to know how others have handled this disease, and how they have met the complications or prevented them. I suggest a form of questionnaire herewith for your consideration.


Dr. Stephenson's idea is so good that we promptly adopted it and, as you will see by the front page this month, we are already carrying it out. You have a good, big idea and want quick action, tell it to The OP.

Two Cash Prizes Offered by Dr. Geo. M. McCole for Papers on Flu Treatment

DEAR OP Folks: I will offer two prizes, $10.00 and $5.00, for the two best articles on the "Treatment of Influenza" if you will run the contest.

A heliofot of good space and printers' ink has been used in telling what osteopaths have done, but little or none on what we used to call in those bygones, "practical" uses.

I have an article written on the subject which I will enter, but we will leave it out of the contest when the prizes are selected.

Get the announcement in the next number of The OP and perhaps you can print the prize papers and some of the other good ones before the AOA meeting and lay the foundation for further live discussions when we come to Chicago.

Yours for the practical work.—George M. McCole, Great Falls, Montana, March 26th.

Iowa Jury Decides Osteopath Entitled to 70 Per Cent of the Surgery!

I WAS indicted by the Dallas County (Iowa) grand jury for practicing medicine and surgery without a license. I practiced at Perry, Iowa, for twelve years. I had an enormous practice, doing about 70 per cent of all surgery from this vicinity with the aid of Dr. Taylor. Medical men, twelve in all, under the guise of the state of Iowa, brought suit. Tried in January term of District Court. Trial lasted three days. My attorney claimed I had right to do minor surgery, use of antiseptics and household remedies. I admitted doing circumcisions, using diphtheria antitoxin, etc. Jury decided I had a right to use the same and I was acquitted of the charge.

General Hospital to Have Osteopathic Department

A NEW hospital with full osteopathic facilities has been built in LaFayette, Ind., the opening date of which was April 15th. It is said the new structure is one of the most complete and modern to be found in the country and that it was much needed among the people of LaFayette and vicinity.

The building is of the Georgian Colonial period. It contains four stories and basement. It is constructed of stone and burnished brick with walls of yellow tile. The floors are of reinforced concrete with terrazzo finish and the halls are covered with battleship linoleum.

The fourth floor is known as the surgical department and is part of the building that interests osteopathy most. It contains four stories and basement. It is constructed of stone and burnished brick with walls of yellow tile. The floors are of reinforced concrete with terrazzo finish and the halls are covered with battleship linoleum.

The fourth floor is known as the surgical department and is part of the building that interests osteopathy most. It is said that on this floor a complete department with all the facilities for osteopathic work has been established. The people of LaFayette evidently realize the value of osteopathy and show mighty good judgment in installing such a department in their beautiful new hospital.

THE MAY OP WILL BE MAILED MAY 12th

You see, we are almost back on our mid-month mailing schedule this month. Next month we shall mail on May 12th and get your flu pneumonia stuff in early for next issue and all other good stuff intended for that issue.
ULCERS - INDOLENT VARICOSE SYPHILITIC

Wide clinical experience has proven Dionol to be effective in an exceptionally high percentage of cases, even where other measures had failed. TRY IT, Doctor, and see for yourself.

While Dionol does not claim to eliminate the systemic infection to which luetic ulcers is due, it has nevertheless proven remarkably effective in healing such local manifestations.

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INFECTED WOUNDS clear up within a week or two. IN BURNS there is instant relief and exceptionally rapid healing. Septic invasion never follows. Dionol is equally remarkable wherever there is local inflammation. You should know more about it, Doctor, and how extensively prominent Osteopaths are using it. Literature and sample free to physicians (only).

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Just the thing to beautify your office. Keeps every patient’s Kimono clean and out of the dust. Boxes are made of extra heavy Chip Board, covered with fine black binder’s cloth. Each box has a brass card holder to insert patient’s name. Size of box 13x5x5.

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Price of M.C. Kimono Cabinet, in Golden Oak finish, without boxes - - - - $8.50
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All prices f.o.b. Michigan City.

MICHIGAN CITY PAPER BOX CO., Michigan City, Ind.
Bitter Experiences of an Osteopath Who Served in the Medical Corps of the Army

Raymond Sawyer Ward, D. O., Montclair, N. J.

INSPIRED by patriotism and an ardent desire to prove to the world the value of osteopathy, I went to France in December, 1917, as a buck private in Base Hospital No. 48, a Homeopathic Red Cross Unit, which, I was told, was going to France immediately. This unit was to await assignment for F. Honan, of New York, who, being an enthusiast over the possibilities of osteopathic treatment, wanted an osteopath to enlist with his unit.

Despite the assurance that we were to be in France by February, 1918, it was not until March 6, 1918, that we were even mobilized for active duty. From New York we went directly to Fort McHenry, Md., for training which consisted of duties such as kitchen police, shoveling soft coal, heavy and light “filing” (marching, tent pitching, litter, ambulance, and first aid) and some hospital ward routine. My being a professional man meant nothing in the eyes of an illiterate major. I had my share of the dirty work along with the rest. We were all waiting impatiently for sailing orders to come. Finally we received orders directly to Fort McHenry, Md., to start camp as we were going to leave in a day or two.

This proved to be a false rumor, as did several other reports. About this time I applied for a commission in the Sanitary Corps, not knowing that this act would prevent my going across with Base Hospital No. 48. The next week the order came suddenly to leave for the embarkment camp and I was transferred at the last moment to General Hospital No. 3, Fort McHenry, on June 21, 1918, to await a commission if I was ever to go overseas. I never knew before just the feeling expressed in that old saying, “jumping from the frying-pan into the fire,” but I do now, for it was soon after my transfer that my real troubles began.

General Hospital No. 2 was run by the Allopathic Trust and very few of the M. D.’s had any use for osteopathy. The fact that I was an osteopath was known to them all. The commanding officer, a lieutenant-colonel in the Medical Corps, sent for me one day to see whether I could cure his himself and acratic. He “saw” in two treatments, for those two cured him, his condition being of short duration. He had to admit that all osteopathy was good, but even after all my talking and preaching about the scope of osteopathy, he could not understand how we dared to treat typhoid fever, pneumonia and acute conditions. He had made one of the captains for sciatica which had been treated unsuccessfully for several months by a medical major who had fixed him up inside of a month, and the medical major was actually sore to think I cured the captain!

The same major was on the board to examine me for a commission, and you can imagine the oral examination I got from him! It was not a fair test of knowledge, and furthermore, he tried to trip me up on every question. This grilling lasted an hour, during which the three major ridiculed osteopathy all they knew how to. How I wished I were in civilian clothes then! The way I felt, I know one or more majors would have been on the casualty list. But I remembered that I was only a buck private in our glorious army and under military discipline, so I had to take all their abuse without retaliating. I know I passed that examination, but my papers never reached Washington, as I found out later. Consequently I never received my commission, but remained a private, obeying the orders of some ignorant “non-com” over me. It was bitter medi-

cine for me to swallow, as a lot of them thought I was a buck private in Base Hospital No. 48, a Homeopathic Red Cross Unit. I was told, was going to France immediately. This unit was to await assignment for F. Honan, of New York, who, being an enthusiast over the possibilities of osteopathic treatment, wanted an osteopath to enlist with his unit. Not one of these men went to the hospital, but kept on the job and were all exposed to infection, I escaped, thanks to the treatments I received from Baltimore osteopaths.

On the quiet I treated some of the men I knew in the Fort, who started in with the typical influenza symptoms. Not one of these men went to the hospital, but kept on the job and were all right in a day or two.

From my experience I know that osteopathy...
Why Osteopaths Succeed

in the treatment of constipation and its sequellae is because they recognize the mechanical nature of its causes and apply mechanical means to overcome it.

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The OSTEOPATHIC PHYSICIAN

could have saved thousands of lives in the army camps if it had not been for the hatred of the Medical Department of the army of the osteopathic, I should have no desire to stand in the place of those men "higher up" in the Surgeon General's office on Judgment Day. They will have much to answer for the American public when the whole truth is known and investigations are made in the various departments at Washington. I have only one man like the dauntless, warrior Chamberlain, who does not hesitate criticizing the Administration and War Department evils, will be given all the data we have, but without any partiality in civilian practice during the epidemic, and the status of osteopathy in the army.

In my experience with M. D.'s and medical treatment, the army has done a wonderful job of good, inasmuch as it has made me a stronger osteopath and it has definitely decided my future. Before I went into the army, I was studying medicine, anxious to obtain the M. D. degree and all the supposed "prestige" that went with it. A year's experience in the Medical Corps, however, has made me see the "light," so I have returned to civilian life to practice GOOD PURE OSTEOPATHY, and drug medicine be damned! I am thru chasing the pot of gold at the end of the medical rainbow and I am going to stick to the nugget, osteopathy, which I possess.

Status of Osteopathic Physicians as Regards Discharge from Army and Navy

THE following correspondence will give information to osteopathic physicians now in the army or navy who desire discharge on their own application:

From the Adjutant General of the Army to the Commanding Generals of all departments in the United States, independent camps and cantonments and demobilization centers.

Subject: Discharge of osteopathic physicians on application provided they have been duly licensed.

With reference to circular letter from this office under date of December 19, 1918, on the subject of, "Discharge of physicians, dentists, etc., on their own application," it is directed that osteopathic physicians and surgeons will be included in the provisions of this order and granted discharge on their own applications, provided that they have been duly licensed to practice medicine in their home states.

By order of the Secretary of War.-H. G. Leavard, Adjutant General, February 5th, 1919.

The OP, Chicago: Thinking perhaps you had not received this and for the benefit of those who may be in the military service and do not know about it, I send you letter from Adjutant General's office.

I made application for discharge from the military service under the above provisions and my papers have been indorsed by the various superintending officers, my discharge being recommended for any time after the 22d of this month. So I expect to be released from military duty before a great length of time now elapses.

Trusting the information contained in the quotation may be of some value to you, I am, truly, Charles E. Pollard, Lt. Q. M. C. Camp Custer, Michigan, Assistant Camp Finance Officer. March 13th.

Henry S. Bunting, care of The Osteopathic Physician: Enclosed please find copy of letter which I received from the Surgeon General of the army, which may be of interest to you and the profession.—Have your letter.

My Dear Mr. Patterson: In reply to your letter of the 11th instant, in which you enclosed the order of the Adjutant General of your Department in relation to the discharge of osteopathic physicians, I have to inform you that the demobilization of the medical department of the army was not an impossibility. The force of the army is occurring without any reference whatever to a license under which they are authorized to practice in any state.—W. C. Braish, Surgeon General, U. S. Navy, Washington, D. C., March 13th.

Osteopathic Physicians Not Wanted in the Army, But Citizens Ask for Them

SURGEON GENERAL GORGAS may have been sincere when he stated he did not want osteopathic physicians in the army. His sincerity, however, was not based on public opinion or the needs and wants of the boys in the service. Just because he and his cohorts did not want osteopathy, the boys who really realized the need for that kind of therapy had to go wanting. The following petition is a good idea of what the people want.

We, the undersigned citizens of Hermiston, Umatilla County, Oregon, desire by the affixing of our signatures, to secure the release of Surgeon W. W. Ilsley (known to us as Dr. W. W. Ilsley), stationed at Camp Lewis, commending him to you on a furlough and have rendered inestimable assistance to our city and community during the influenza epidemic which has raged here since Christmas time. We state in asking that his present furlough be extended ten days.—Hermiston Oregon, January 7th.

C. S. McNab, City Alderman.
J. D. Watson, Acting Mayor.
J. H. Young, F. M. Hermiston.
Thomas Campbell, Merchant.
H. H. T.螭idon, Farmer.
E. W. Mack, Druggist.
B. S. Bayless, B. P. O. E.
P. P. Skipper, Farmer.
B. B. Sicel, Merchant.
G. R. M. Holman, Farmer.
H. L. Fraser, Hardware Dealer.
I. A. Thoman, Nail Worker.
B. S. Kingsley, Merchant.
Otto C. Sapper, Merchant.
C. M. Jesen, City Recorder.
E. W. Mack, Irrigation Engineer.
F. W. Sawyer, Banker.

The above petition is fairly clear, but the following letter throws a little more light on the subject:

Dr. Ilsley was the osteopathic physician at Hermiston, Oregon, before his enlistment in the Hospital Corps of the army. Pertinent to the situation, it may be stated Dr. Ilsley easily passed the examination for the Medical Reserve and was issued a lieutenant's commission. When it became known that he was an osteopath, the commission was revoked and he was made a hospital flunky, while thousands of army boys at Camp Lewis died of "flu" thru lack of the service which the above petition shows Dr. Ilsley was capable of rendering.—G. S. Hotsington, D. O., Pendleton, Oregon.

Capt. F. A. Dilatash Back in Practice

Capt. F. A. Dilatash of the 147th Infantry, 37th Division, has been discharged in the States and expects to be back soon in civilian life. Captain Dilatash formerly practiced in Cincinnati and will be welcomed by many friends among the profession and laity. To all those of the profession who entered military life those of us who remained behind extend a most cordial welcome upon their return and he made professional duties.—Bulletin of the Ohio Osteopathic Society.

Lieutenant J. C. Snyder Joins Staff at Macon

We received an interesting letter recently from Dr. J. C. Snyder. His letter is as follows: I have been on the staff of the St. Hil-seed Sanatorium at Macon, Missouri, since January 9th, having been discharged from the army December 1st, after eighteen months of service. I was a lieutenant of the field artillery, but attached to the air service, in which I was trained as a signal officer. I was born in O., and before the war I was practicing at Lexington, Missouri.—J. C. Snyder, Macon, Mo.

Dr. Stewart F. Fitch Back in Private Practice

Dr. Stewart J. Fitch of 1175 North Los Robles avenue, Pasadena, California, has resumed practice after his brief service in the Medical Corps. U. S. A., and has been stationed at Camp Kearney, California, at first with the 82d Infantry, and then with Ambulance Company 284, 16th General Staff. Dr. Fitch received his honorable discharge February 11th.

The Osteopathic Physician

FLOOR WORLD-HERALD BUILDING

Museum of Osteopathic Medicine, Kirksville, MO.
Dr. McClimans Gets a Lieutenancy
Dr. W. A. McClimans of Chicago answered the draft June 25th, 1918. He was sent to Camp Jackson, South Carolina, and was promoted to corporal in a few days. August 15th he was transferred to Camp Lee, Petersburg, Virginia, to the Central Officers' Training School, Infantry School. He was in the base hospital four weeks with ‘flu’ and pneumonia and his life was despaired of for a few days. However, he was fortunate in getting excellent care, although many were neglected. It was impossible to obtain osteopathic care in any manner. Dr. McClimans was commissioned as lieutenant and received his discharge November 30th, 1918. He is now located at Harvard, Illinois, where he has been since January 15th. He reports that he is enjoying good practice. He has given up his Chicago office for the present.

Dr. Raymond S. Ward Returns to Civilian Practice
Dr. Raymond S. Ward of Montclair, New Jersey, has returned to his practice of osteopathy. He enlisted with base hospital No. 68 December 10th, 1917, and was sent to Fort McHenry, Maryland, for training. Just before that unit left for France he was transferred to General Hospital No. 2 at Fort McHenry, where he was stationed until he received his discharge on January 20th. Dr. Ward’s experience with the omnipotent medical brethren (?) has only been another chapter in the history of Intolerance, which, after all, has made Dr. Ward a stronger osteopath.

Dr. Lundgren Had Experience in Signal Corps
Dr. Abel L. Lundgren of Fort Dodge, Iowa, was a recent visitor at the offices of The Osteopathic Physician. He was a graduate of the Des Moines College of Osteopathy in May, 1917. He enlisted in the Signal Corps as photographer, December 13th, 1917. Was in Fort Omaha, Fort Logan, Kelly Field and Wilbur Wright Field. On the 7th of September, 1918, he was transferred to the Medical Department and received his honorable discharge on February 30th, 1919. Dr. Lundgren is planning on locating in some Iowa town after completing a contract at Rockford, Illinois, in laboratory work.

Returning Soldiers and Sailors Reenter Chicago College
Many former students are returning to Chicago College of Osteopathy in khaki and in blue, after an absence of six months or more in the United States service. Some have spent nearly two years in the thickest of the fighting on the other side. Some have not returned as yet, but we are very glad to say that none of our 49 members in Uncle Sam’s army and navy were killed or even seriously wounded. All will have returned in the near future to continue the study of osteopathy. Thirty of our boys were in Uncle Sam’s army and navy.

Amputations in Army Total 3,034
Washington, March 24—According to official advice the total of “major amputation cases” in the United States forces to date is 3,034 of which 2,308 are arm and leg cases and of these approximately 600 are arm amputations, 1,708 are leg amputations. The remaining 726 are hands, feet and two or more fingers. Not all of these men require special training to make a living, the Federal Board of Vocation pointed out. Those who in the main require amputations, are farmers, artisans and whose trades require great activity, such as carpenters, teamsters, steel, iron workers, and the like.

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Are you supplied with good educational anatomical charts for display on your office walls? If not, you should obtain a series of the best. They are useful in discussions with patients and for reference when you are studying obscure pathological conditions. We show here reduced illustration from

The Michel Chart of the Spine and Spinal Nerves
This chart is printed in three colors and shows two life-size views of the bony spine, front and side views, with the spinal nerves issuing from the intervertebral foramina; the spinal cord and origin of the spinal nerves; the Cervical, Brachial, Lumbar and Sacral plexuses of nerves: the Great Sciatic and all other pelvic nerves; the Sympathetic System of nerves complete; the plan of the formation of a spinal nerve, a life-size skull, a most perfect representation of the 5th Cranial nerve, and various other side pictures.

This chart, printed in a new and most beautiful style, attracts the attention of everyone as soon as perceived.

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THE OSTEOPATHIC PHYSICIAN

Denver Post Graduate Course
Has Successful Season

The Denver Post Graduate Osteopathic Efficiency Course conducted by Dr. C. C. Reid and several others during February, 1919. The following doctors took advantage of the course this year: Dr. O. R. Meredith, Nampa, Idaho; Dr. F. E. Maggee, Webb City, Mo.; Dr. F. A. Englehart, Oklahoma City, Okla.; Dr. M. Quisenbury, Lyons, Kansas; Dr. James Decker, Boulder, Colo.; Dr. J. E. Ramsey, Denver, Colo.; Dr. E. A. Moore, Denver, Colo.; Dr. J. H. Hook, Grand Junction, Colo.; Dr. J. S. Baughman, Burlington, Iowa; Dr. H. A. Fenner, Denver, Colo. All reported high satisfaction and returned home to do greater and better things in a more efficient way. All of the doctors praised the course highly. Some of the letters Dr. Reid received are printed here.

Dr. C. C. Reid: Have just received the certificate of the wonderful course you have given this past month and I want to thank you for urging me to come when I phoned you over long distance. Am sure it will mean a revolution of my office and its organization and an increase in my practice. I never have taken this work or attended a convention but what my practice was increased by reason of the help and improvement I received. This course is singular and unique in itself and fills just the chasm I needed. I think it will enable me to take some advanced work each year.

Dr. C. C. Reid: I came home and jumped into a heavy practice right away and am sure my practice was more than any March I have ever had for the space of time. I collected some $700 for the half month or thereabouts. I have not figured up but I have had over two dozen operations for piles, radical nose-pharynx, adenoids, two shoulders traumatic dislocations etc., etc., so you see the course has been worth while to me. Without taking time to figure up at this time, I am sure I have made over $500 from the operative work alone.

Dr. C. C. Reid: I wish to take this occasion to thank you for the splendid course in Eye, Ear, Nose and Throat Surgery, and the Cadaver Course which you gave during the month of January. It was well worth the time and expense and I already feel more than repaid. Besides being a good review in the anatomy of the head and neck, it gave me more and better technic in the operative work and enables me to render much better service to my patients. I feel that I am on a par with the medical specialists in the operative work, and far in advance of the average men who try to do the nose and throat work in addition to their regular practice.

Ohio Society's Bulletin Resumes Quarterly Issue

We regret to read in the Bulletin of the Osteopathic Society that it will issue quarterly instead of monthly for the year ahead. It has proven a good serviceable paper to the Buckeye bunch but likewise considerable of a burden to the state society exchequer as there was a deficit of $126 at the end of the year as well as $302 of outstanding accounts carried as assets which may develop some losses. Well, a good quarterly is a very serviceable arm of a state society, but we incline to the belief that a live monthly—if it really be alive to all local interests and issues—is worth all it costs the state membership.

THE TAYLOR CLINIC

President and Surgeon-in-chief
DR. F. J. TREENER.
Superintendent and Roentgenologist
DR. DWIGHT D. CLARK.
Field Manager
DR. J. N. WAGGONER.
Eye, Ear, Nose and Throat
DR. LOLA D. TAYLOR.
Gynecology and Obstetrics
DR. L. VAN H. GERDINE.
Mental and Nervous Diseases
DR. C. D. HEASLEY.
Laboratory Diagnosis

LIBERTY HOSPITAL—ST. LOUIS
[From the Missouri Osteopath]

St. Louis now has an Osteopathic Hospital. "Liberty Hospital" is a name significant of the times, and especially of the Osteopathic profession. Dr. J. H. Crenshaw is physician in chief in the new hospital, and the staff of physicians is made up of twenty-one prominent osteopathic physicians of St. Louis. The hospital building is a 38-room structure, well lighted and ventilated and suited to the purposes of such an institution. Dr. Crenshaw states that "while the hospital is primarily for obstetrical and gynecological work, all cases requiring hospital care will be cared for in Liberty Hospital."
"Osteopathic Health" Standard Literature

We offer the following brochures, all of which are standard numbers, at $4.00 a hundred. In lots of 500 we will extend a discount of 10%. In lots of 1,000 or over we will extend a discount of 20%.

The supply of many of the issues is limited and it is doubtful if they will be published again for many years. There is no time like the present to lay in a good supply of assorted standard field literature.

If you would prefer to look over the issues before you buy, send us 25 cents and we will send you a complete set of sample copies.

Please Order by Number

No. 2 A. T. Still, Scientist and Reformer: The first of the now famous brochures by Professor M. A. Lane, of Kirksville. Supply very limited.

No. 3 Buritisis; Glass Arm; Brachial Neuritis; Flat Foot and "Broken Arches"; Hay Fever Cured by Osteopathy. This brochure tells how "foot troubles" are associated with spinal and pelvic lesions. Also how baseball pitchers are cured of "Glass Arm." A fine story about osteopathy and Hay Fever, telling importance of early diagnosis and prompt treatment.

No. 6 Osteopathy in the Infectious Diseases: A brochure by Professor Lane. A popularized, scientific exposition showing why osteopathy is the most efficient and effective system for combating the infectious diseases.

No. 7 Most Diseases Are of Spinal Origin: A modernized edition of Dr. Bunting's famous brochure which was the first classic in osteopathic popular literature; originally issued seventeen years ago and has been through six large editions. It is always in demand and stands today as the most complete and comprehensive brief, general statement of osteopathy ever prepared.

No. 8 Osteopathy in the Inflammatory Diseases: The fifth of the documents by Professor Lane and deals with boils, chronic dysentery, tonsillitis, etc.

No. 9 Nephritis, Dyspepsia, Insomnia and Neuralgia: Also story of a remarkable cure of a blind, imbecile child by osteopathy, being an extraordinary example of the potency of osteopathy. Founded on a case in the Philadelphia Municipal Court.

No. 11 A Chronic Dyspeptic Greatly Surprised—Strains and Sprains of the Back and Limbs—Osteopathy for Men—A Fall From a Chair Gave Baby Constipation—"Neglecting a Fine Machine." A very useful brochure for getting people interested in osteopathy who are afraid to tackle any reading matter which seems to be "heavy."

No. 12 How "Bad" Mechanism in Our "Joints" Makes Sickness: A splendid illustrated brochure dealing in detail with lesions. Shows how sub-luxations may cause pressure on nerves and how the free circulation of blood supply and nerve force is interfered with. One of Dr. Bunting's most valuable brochures which has been through several editions.


No. 16 Osteopathy Potent Where Serums and Vaccines Fail: Shows how little can be expected of the various serums and vaccines in view of scientific knowledge of today and why osteopathy has a particular potency in most of the diseases for which these serums and vaccines have been experimentally applied.

No. 17 The Osteopathic Catechism: everyday questions and answers that pass between patients and practitioner: Part I of a new edition of this famous brochure which was written by Dr. Bunting seventeen years ago. It has been revised to date and is printed in large type. It covers the many questions likely to be asked by a person interested in osteopathy and considering the wisdom of taking osteopathic treatment.

No. 18 A. T. Still as a Medical Thinker: Professor Lane's great tribute to the "Old Doctor" and a most lucid and comprehensive estimate of osteopathy. Tells briefly of the great reforms in medicine and shows that Dr. Still was the first to give the world a really scientific therapy. Shows also that the evidence of all modern scientific research supports the therapy of Dr. Still.

No. 19 Children's Ills Stopped in Their Beginnings: This brochure contains an excellent article on children's ills. In addition, it explains the value of osteopathic treatment after confinement; shows how osteopathy can help liver and stomach troubles; and also explains the benefit of osteopathy in the treatment of the various forms of pneumonia.

No. 20 Nervous Prostration or Neuroasthenia (Illustrated): This brochure is a frank and careful statement of the marked difference in diagnosis and treatment between osteopathic and medical practice in this illness. Just how sore spots in the spine become significant in nervous prostration is made especially evident.

No. 21 Osteopathy Synonym Surgery: The point of departure of this article from all others explaining osteopathy for lay understanding is that instead of the ordinary negative statements telling that osteopathy is not drug practice, not massage and not other things, it swings directly into positive description and tells that osteopathy is surgical work minus instrumentation.

No. 22 Facts and Fallacies Regarding Osteopathy: This brochure voices just the facts you have so often presented to your patients to set them right on things osteopathic. It proves the untruth of the statements that osteopathy is rough, painful and severe; that patients are treated nude; that osteopathy is "scientific massage"; and gives other important information.

No. 23 The Osteopathic Catechism (part 2): Sets forth the facts which establish the educational status of our profession, as well as a lot of plain, understandable talk about the osteopathic diagnosis and treatment of disease.

9 So. Clinton Street, Chicago
THE OSTEOPATHIC PHYSICIAN

The Organ of News and Opinion for the Profession

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EDITORIAL

Fairness, Freedom, Fearlessness

"How to the line, let chips fall where they will"

Vol. XXXV APRIL, 1919 No. 4

HOW THE AMERICAN MEDICAL ASSOCIATION MEETS OSTEOPATHY'S CHALLENGE

Osteopathy met and defeated the cohorts of the American Medical Association on every hand during the ravages of the influenza epidemic. While the "regular" practice of medicine lost their cases in appalling numbers, their fatalities running from 12 to 25 per cent for influenza and pneumonia combined, the osteopathic profession of North America went steadily ahead saving human lives, and north, south, east, west, in city, town, hamlet and countryside practice established a uniform record of losing barely 1 per cent of their cases from both of these diseases combined.

The American Osteopathic Association took the field to collect statistical data and has obtained authentic records of the treating of more than 80,000 cases of influenza under osteopathic treatment. The death rate of only one-fourth of one per cent and nearly 5,000 cases of pneumonia with a death rate of 9.6 per cent, while, as stated, the combined death rate from both diseases fell below 1 per cent, owing to the comparative rareness of pneumonia developing from influenza under osteopathic therapy.

These all-important facts to mankind and to any true therapeutic science have been given a very wide publicity. The AMA wanted to cover the American Osteopathic Association as well. It alone has given these facts circulation to the extent of almost a half million periodicals distributed. The world now knows the facts. And the American people know them.

What is the attitude and what has been the answer of this powerful and historic medical profession toward these claims of "chiropractors, naprapaths or naturopaths" which it names merely by way of setting up "the sick" to kick over? It is not interested in or worried over the work or the effect of the "regulars." It wants to sustain the prestige and public relations of the medical profession toward these hopeful therapeutic facts. All of these actually obviously invalidate the "statistics," even the "casual record" of a "regular" which he tabulates. "In my years of service," said the ancient driver of the four-wheeled vehicle, "I have never lost a single passenger by drowning!" "If we have been crossing the Atlantic and the captain of the ocean vessel has said, 'This cable was over run ever over by a telegram while in my charge'". One might add: "It is a symbol of the successful service rendered by the osteopaths of North America who have proven to the world by their own success in practice that they are the only ones who can save human life in such an epidemic instead of a life saver."

The real hypocrisy and innate cowardice of the American Medical Association was never more clearly shown than in this act. To those who understand, it will mean very much. The AMA is unable to meet the issue of success in therapeutic competition. The "regulars" have backed up their "statistics" with no evidence that medical plunderbund and political trust, over the work, achievements and records of success of the osteopaths of North America who as therapeutists have actually been killed by practitioners of medicine, and finally they ignore, or possibly do not realize the further fact that, it being illegal for the osteopaths of North America to collect statistical data and has obtained these actualities obviously invalidate the "statistics," even the "casual record" of a "regular" which he tabulates.

"The A.M.A. Journal is here slapping at the osteopathic physicians of North America who as therapeutists backed up their "statistics" with no evidence that medical plunderbund and political trust, over the work, achievements and records of success of the osteopaths of North America who as therapeutists have actually been killed by practitioners of medicine, and finally they ignore, or possibly do not realize the further fact that, it being illegal for the osteopaths of North America to collect statistical data and has obtained these actualities obviously invalidate the "statistics," even the "casual record" of a "regular" which he tabulates."

"It IS a symbol of the successful service rendered by the osteopaths of North America who have proven to the world by their own success in practice that they are the only ones who can save human life in such an epidemic instead of a life saver."

THE SAVING GRACE OF COMMON SENSE

Generally we hear comment that "Osteopathic Health" is "one of the most popular and effective patient-puller." This comment, mind you, is made as an object lesson to the magazine! Could anything be more absurd? Could there be any better object to use for giving a patient's money where it will do the most good in the world over? Superficial criticism soon reaches the orthodoxy absurdism. Of course "Osteopathic Health" IS a patient-puller. We confess it freely. We said it first. It is a patient-puller because it makes plain to people seeking health the potency and life-saving value of osteopathic therapy.

Among what class of people is osteopathy most "likely to receive a quick hearing?" From what class of people does it draw its patients, its strongest friends and adherents? Is it not from people weary of illness, seeking some medicine and yet unfamiliar with the methods that seemingly can change health—people afflicted with acute or chronic complaints who have lost confidence in drug medicine? It surely is. Now what a disgusting outrage against finicky-fine feeling and to lead these people to deliverance—yes, even bring them right to your osteopath's office and put them up on the table for diagnosis? It IS, of course. They ought to be left to be devoured by the hosts of therapeutically superstitious and osteopathy's unscrupulous imitators. In short, this is a common sense, doctor, is this the silly argument?

When a health-seeker, a person afflicted with acute or chronic illness, visits the office of an osteopathic physician and puts his case in the hands of that physician he becomes what we call the best of contributions called forth by the McCole prize contest.

SHALL YOU WIN THAT CASH PRIZE FOR A FLU ARTICLE?

Dr. McCole offers two cash prizes for the first and second best papers to be sent in to THE OSTEOPATHIC PHYSICIAN and for the best article on the subject of osteopathic care and treatment of influenza. The first prize is limited to designate the most successful papers written, and the second to the symbol of the successful service rendered in any other way by writing such helpful articles. The bonus or honor, we hope, this contest will be worth striving for.

We agree with Dr. McCole, that the epidemic has passed, that we who fought the good osteopathic fight and went over the top, have the time and the opportunity to publicize the results of our research, to tell what we learned by actual study and treatment of these cases. We owe it to our science, to mankind and to posterity.

Now we have the time to write in detail about these epidemic cases, and we did not have the time to waste over the great fight.

The general and growing yearning for this sort of information is indicated by the offer of Dr. McCole, and likewise by the call for data by Dr. S. D. Stephenson, of Nelson, Nebraska, whose letter is also printed this issue.

We will gladly make space for all the best of contributions called forth by the McCole prize contest.
From Darkness to Light

[From Jim Jam Jems for February, 1919]

YOU are invited to absorb a segment of truth which throws a flood of clear light—as it did upon the hitherto sightless eyes of Tom Skeyhill—adventhew American Medical Association methods and their golden tinted and golden tainted organs of subsidized, sick spittle "news." When you can gather grapes from a thorn bush or apples from a prickly disciple plant that pure spring water from out a heap of festering garbage you can get a little truth from A. M. A. "nearsighted" points. Until you can do these little things look for the truth elsewhere. And right here assimilate a chunk of it.

Tom Skeyhill was in the allied forces from Australia as a signaler. He saw—as long as he could see anything—hot service on three war fronts. At the awful—and offal too—Gallipoli disaster in December, 1915, he was stricken totally blind from shell shock. His sight, but not his courage, was blotted out. In charge of an attendant he toured various lands speaking for Red Cross and other war activities. He consulted the most eminent eye specialists in England, France, in Italy, in Australia and in the United States. The verdicts were alike and particularly emphatic in the U. S. A.—"Absolutely hopeless, blind for life." It was a pitiful case.

But stubbornly pressed in their effort to elude the fact that by a wonderful "operation" the sight of Signaler Tom Skeyhill had been restored. By cleverly edited language and by ingenious suppression of the real facts newspaper readers were led to believe that such so-called "regular" practitioners or their assistants had performed this wonderful "operation." It was as clever—and as false—as most of their propaganda. Now what really happened? Recently while in Washington delivering addresses and just prior to a speaking tour for the Red Cross Tom Skeyhill was seized with intense and unbearable pains in his neck. He couldn't sleep; he couldn't address his audiences. In addition to being totally blind he was suffering the most maddening pains.

He had observed—albeit he was blind—that dope poured into his stomach had no effect upon those lancinating pains in his neck, so he betook himself to an osteopath, Dr. Riley D. Moore, of Washington, D. C. Dr. Moore told Signaler Skeyhill that he was afflicted with three serious deviations from the normal spine, any one of which might be the cause of his sufferings and also of his blindness.

Here is Dr. Moore's own description of a real cure, one of the most wonderful in medical annals: "He was placed on the operating table. I first relaxed the muscles of his neck. His neck was most sensitive, and I tried to relieve that as a preliminary to work upon the deeper structure. With the patient lying on his back I relaxed the neck muscles and that gave temporary relief from the sensitiveness complained of. "Then I began the correction of the maladjustment of the vertebrae, beginning at the uppermost articulation in the neck, as parts of the cervical region were worse than others, although the whole was in bad shape. After some minutes of trying to correct the lesion at the sixth cervical vertebrae, on the left side, the patient threw his hands up to his left eye and said it pained him severely. "I felt that articulation and began to work out the tension and sensitiveness of the surrounding structures. Then I returned to the sixth cervical and he again complained of sensitiveness in his eye. I left him to ail as he chose, but on my third return to the sixth cervical the pain in his eye was less and he said he could see a sort of shimmering or glow before his eyes which they were closed. "Soon he seemed to be unconscious and his business manager became alarmed, but I continued to work on him, for I knew that he was unable to speak, but knew all that was going on and was afraid only that I might stop work. "After correcting the neck lesion as far as I could at the time, I began the correction of the first dorsal vertebrae, and at the first twist he suddenly leaped from the operating table, held his hands to his head and seemed to be in intense pain for a moment. Then he exclaimed that he could see, and the first thing his eyes lit upon was a case of flowers, which he folded in his arms in joy. "Just then he suffered a lapse of memory. He was back in Gallipoli giving orders to men with him, instructing them what to do in No Man's Land. Then he turned upon me demanding what I was doing in civilian clothes. He could not comprehend for a time that he was in Washington or how he got there, but he gradually calmed down. "Everything he saw was pure white, even the grass and flowers. "I had him wear colored glasses for a short time to protect his eyes from too strong light and strain, and his vision and color sense are now perfect, he reports to me."

In writing us about this matter—in answer to our inquiry to the exact facts of this cure and not for any boastful purpose—Dr. Moore modestly says: The remarkable thing about the case was that not he recovered his sight under osteopathic treatment but that one treatment was sufficient. We are no touter for osteopathy nor for any other "cure." We are nobody's "organ." We respond to "no touch" but the magic touch of the truth. Why didn't the A. M. A. titles and their organs and their subsidized founts of "news" tell the truth about the restoration of the sight of the blinded hero? Why did they and their journals and their organs lead the public by clever deceit and by the suppression of the truth—the meanest kind of a lie—to believe that the sight of Signaler Skeyhill had been restored by one of their own sacrosanct ilk? Why didn't they give osteopathy and its practitioner, Dr. Moore, the credit for doing at one brief treatment what their best experts in two continents

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THE OP, 9 So. Clinton Street, Chicago
The Recent Post-Graduate Course at the Chicago College of Osteopathy

By Preston R. Hubbell,

POST-GRADUATE course given by such men as Dr. Littlejohn, Dr. McConnell, Dr. Laughlin, and Dr. Delemery was well worth going miles to attend as everyone in the profession would agree. However, the particular course which was pulled off at the Chicago College of Osteopathy in February had an unusual setting, and in my opinion, struck a 42 centimeter blow which will awaken our profession to the reality of what we have, more than anything that has been done in the last ten years.

In the first place, there were at least forty-two otologists, and of us present from all parts of the country. And everyone came to learn something. This naturally produced a harmony of feeling. The very timing of a course at this time was significant, and I feel that the Chicago boys should be given full credit for this.

The past few years have been rather dark chapters in the history of osteopathy, as we all know. Our profession has been slipping. There is no doubt of it. And yet there are less osteopathic physicians than there were five years ago, and our population has almost doubled. The records of our state are not at all encouraging and still we have only one of the best laws in the Union. There are, of course, many causes which might be found to explain this backward trend. However, I am sure that the philosophy of Al Johnson, who says that when he doesn't get the laughs from his audiences he looks in the glass and wants larger lungs, is just as sound as his own

I am firmly convinced that if our profession would stop talking for a while; get off the stage; go back to our dressing rooms and study our own anatomy, we would soon solve our difficulties.

Our recent efforts to advance osteopathy have all gone off like punk fire crackers. In fact, most of our time has been spent in accumulating and producing a fine array of camouflage. We have some splendid artists who would have rendered excellent service to our cause in this particular branch of the War Department. We have splendid propaganda, none of which I would discount. We have plenty of politicians who like to wear officer's uniforms and want to be consulted on every move that is made. We have fakers who know that the Lord is with them and we have plain Huns who can't think, but just obey. All that we lack is just plain ordinary red-blooded men who have the brains and the nerve to build big as well as bring them up to the front line and go over the top for osteopathy. We need guns not camouflage. We need ammunition, not noise. We want brains not noises. We want red-blooded men who are not afraid to fight; not soft tongued sissies who spend their time adjusting their bustles for fear some one might criticise their style of dress. MEN, GUNS, AMMUNITION. Where can they be found—for osteopathy must win!

"Truth crushed to earth will rise again." Osteopathy has been declining, but if we can find the men, guns, and ammunition, she will rise again. No other profession has the men, they have the gun and their production is increasing fast. If your faith is waning and your morale is getting low, ask for a furlough and go to Chicago. The battle is on, the battle line is within sight. You can see, but when you hear those commanders in our profession tell you and show you what they have actually done, you will go back home with a firm determination to build a gun alone, if you can't get help, and shoot it yourself.

There is just one vision that I would like to see put across in our convention this summer, and that is that we have a unified command in our headquarters and that some definite policy be formulated to organize hospitals in every city in the country. Then we could have uniform case records sent in from these work rooms which would be real ammunition.

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Journal of Osteopathy
KIRKSVILLE, MISSOURI

THE OSTEOPATHIC PHYSICIAN

Osteopaths Propose Amendments to California’s Medical Practice Act

The following amendments have been introduced in the legislature of California. Reasons are given as to why these amendments should be passed. The Assembly Bill No. 814 was introduced by Mr. Merriam, January 24, and was referred to committee on Medical and Dental Laws. It amends Section 9 and 10 of the present medical law (See State Register for copy of law).

Section 9. Every applicant must file with the board, at least two weeks prior to the regular meeting thereof, satisfactory testimonials of good moral character, and if any diploma or diplomas issued by any legally chartered school or schools (approved by the Board), the requirements of which school or schools shall have been at the time of granting such diploma or diplomas in no degree less than those required under section ten of this act, or satisfactory evidence of having possessed such diploma or diplomas, and must file an affidavit stating that he is the person named in it.

The words “Approved by the Board,” printed in heavy-faced type and enclosed in parenthesis, appear in the present law, but have been omitted from this amendment. The words, “section ten of,” also printed in heavy-faced type, but not enclosed in parenthesis, have been added in the proposed amendment.

These are the only changes in Section 9, excepting that the following clause has been omitted because it was no longer necessary, the time limit having expired:

(Provided also, that before July 1, 1918, in lieu of the diploma or diplomas and passing grades in the courses herein required in a school or schools approved by the Board, the applicants for “drugless practitioner certificate” not less than sixty-four weeks, consisting of not less than two thousand hours, and for “physician and surgeon certificate” totaling not less than one hundred twenty-eight weeks, consisting of not less than four thousand hours, it being required that all applicants shall have received passing grades in all such courses that the applicant or applicants shall be admitted to examination for their respective form of certificates.)

Section 10. (Applicants for any form of certificate shall file satisfactory evidence of having pursued in any legally chartered school or schools approved by the board, a course of instruction covering and including the following minimum requirements:

The above paragraph, which appears in the present law, has been omitted and the following paragraph substituted for it:

Section 10. The Board must admit to the examination for any form of certificate, applicants who in addition to the preliminary educational and other requirements hereinafter specified, file satisfactory evidence of having pursued in any legally chartered school or schools of any system, a course of instruction covering and including the following minimum requirements:

The words “Approved by the Board,” printed in heavy-faced type and enclosed in parenthesis, have been added in the proposed amendment. The words “Approved by the Board,” printed in heavy-faced type and enclosed in parenthesis, were inserted by Mr. Merriam, January 24, and was referred to committee on Medical and Dental Laws. It amends Section 9 and 10 of the present medical law (See State Register for copy of law).

This Bill amends Sections 9 and 10 of the Medical Practice Act, by striking out the phrase, “Approved by the Board,” and making it mandatory upon the Board to examine all applicants who file evidence, satisfactory to the Board, that they have had all of the preliminary and the medical education required in the present law as a pre-requisite to admission to the examination.

This Bill does not in any particular change the requirements for examination; nor does it in any way alter the present high standards, which must be met by all applicants before they will be permitted to take the examination.

The medical examination is thorough and searching, and no incompetent applicant can or does pass it. The requirements which must be met by each applicant before he is admitted to the examination remain unchanged and are as follows:

He must file evidence satisfactory to the Board, (1) that he is a graduate of a four-year Cali­for­nia High School or its equivalent; (2) that he has had one year of college work in physics, chemistry, and biology; (3) that he has studied for at least three years in any legally chartered school requiring for admission a minimum of four years, and has succeeded in the study of a minimum of four years, and has succeeded in the study of the subjects and hours specified in said board’s examination.

Each applicant must, therefore, prove to the satisfaction of the Medical Board that he has had eight or more years of education specified in the law in preparation for the medical exami­nation before he can be permitted to take the examination. He must then pass the examination before he can receive a license.

This Bill does not in any degree or in any particular change the foregoing requirements. Its object is to guarantee the applicant the eight to twelve years education specified in the law. The right to be examined is now denied to well-educated applicants. The Medical Board derives its uncontrolled power from the phrase, “Approved by the Board.” The high school from which the applicant was graduated must be “Ap­proved by the Board.” The year of college work in chemistry, physics and biology must be “Ap­proved by the Board.” The medical college must be “Approved by the Board.”

Senator Hiram Johnson, when Governor of California, said: “The object of the medical law is to permit men to practice medicine, not to prevent them from practicing medicine. The function of the Medical Board is to license applicants who meet the educational standards of this State and pass the required examination, and not to prevent such applicants from taking the examination.

The Board can, and does have the power of “Approval” in a willful, capricious and arbitrary manner. When the present law was passed, four systems of medicine and surgery were represented by colleges in this State, namely: The Regular, Homeopathic, Eclectic and Osteopathic systems. Under the arbitrary disapproval of the Board the Homeopathic and Eclectic Colleges have closed, and the power to kill any college or system which does not meet with the approval of the Board is taken away, the Osteopathic College must also close.

Is it right, is it just, is it wise to permit seven out of ten members of the Medical Board to exercise the power of life or death over colleges and systems they do not personally endorse? Is it not enough to give them the power to measure all applicants with the yardstick made by the legislature? Let the Board have the power to apply this measuring stick and to deny the right
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A. T. Still, Scientist and Reformer

A Second Bill

Assembley Bill No. 922 also was introduced by Dr. Merriam January 24, and was promptly referred to the committee on Medical and Dental Laws. Its analysis is as follows:

Section 11. In addition to above requirements, all applicants for "physician and surgeon certificate" must pass an examination to be given by the Board in the following subjects:

1. Anatomy and histology.
2. Physiology.

Of examination to all applicants who do not measure up to it, is that not enough power to vest in the Board?

This Bill does not alter the State-made yardstick. It does not take from the Medical Board the right, power and duty of applying this yardstick. The Board can still refuse to examine any applicant who does not have all of the required education. However, the Bill does give the applicant the opportunity of appealing to the courts for relief in case the Board is willful, capricious and arbitrary in its refusal to examine him. When an applicant has had all of the specified education, entitling him to be examined by the Medical Board, he should have the right of appeal to the courts to prove that he measures up to the State requirements if the Board refuses to examine him.

The present Medical Board is composed of five Regulars, two Homeopaths, one Eclectic and two Osteopaths. Seven of these ten do not approve of Osteopathy. Hence they passed resolutions refusing to admit any Osteopathic graduate from any Osteopathic college to the "physician and surgeon" examination. The College of Osteopathic Physicians and Surgeons in this State appealed to the courts for relief. The court held that the Board had no right to take away its approval of the college without a formal hearing. The judge remarked from the bench, however, that the relief the college was seeking would have to come from Sacramento. The Board has notified the college trustees to appear for a hearing on March 17. After this hearing the Board can arbitrarily take away its approval, and neither the college nor its graduates, who have more education than is required by law, will have any remedy. The course of study in this college covers and includes every subject and more hours in every subject than are required by the medical law for a "physician and surgeon" college. The law requires 4,000 hours. This college requires 5,600 hours. The graduates of this college had been admitted to the "physician and surgeon" examination for several years before the resolution of the Board denying approval to the college was passed. With the phrase, "Approved by the Board," eliminated and the mandate to examine all applicants who meet the present educational requirements inserted, a remedy is provided against arbitrary, biased and capricious action by the Medical Board. This Bill does not alter or change existing standards, but does provide a remedy against biased and prejudiced refusal to examine. The examination given by the Board is the best evidence of the character and sufficiency of the education given by the college and received by the applicant. The citizens of the State should not be denied the right, power and duty of applying this yardstick. The Board does not endorse these systems. Surely, the citizens of the State should not be denied the services of Osteopathic physicians and surgeons simply because seven men on the Medical Board who represent other systems of practice do not endorse and approve of Osteopathy. The business of the Medical Board is to license all applicants from all systems who meet the present standards of education and pass the Board's examination. The Board should not have the power to establish one system of practice in California. Unless and until the phrase, "Approved by the Board," is eliminated from the medical law, the Board has the power to establish a State medicine. This is as ominous to human right as is a State religion.

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Are You Strong for Chronic Practice?

If so these months following hard upon the great 1918-19 Epidemic ought rightfully to make more demand upon your professional skill by the partially convalescent than you can find time to render.

Be advised that the April issue of Osteopathic Health is devoted to telling people about the advantages of osteopathic treatment for curing up the long train of serious consequences that persist after influenza which has not been treated osteopathically in its acute stages.

It is peculiarly, therefore, an issue to make more chronic practice.

The issue is entitled “Preventing the Common After Effects of Influenza.” Heart-weakened after “flu” is pointed out as a great peril—especially to cases that were drugged with aspirin, heroin, phenacetin and other poisons of the heart-depressant type. Other sequellae imminently liable are tuberculosis, paralysis, neuritis, melancholia, earache, deafness, digestive troubles, nervousness, insomnia and persistent debility. Such after-ills are shown to be in some part, at least, the result of the pernicious current drug treatments.

Osteopathy is shown to be successful in preventing such sequellae if in charge of influenza in the acute stages, and almost as successful in curing up such hang-over ills when applied in the chronic stages of semi-convalescent misery.

These poor victims with one foot on the rock of recovery and the other in the slough of suffering and despondency are surely entitled to rescue. The osteopaths who circulate this April issue of Osteopathic Health and thus advise the people about the true nature of their condition and the power of osteopathy to save, will be true humanitarians and they will have plenty of opportunity to prove up the value of their therapeutics.

You will also take satisfaction in the section of this magazine which quotes foremost medical authorities in admission of their powerlessness to cure flu and pneumonia and putting the verdict of failure on drugs, vaccines and serums for such purposes.

We believe the DO who never used a piece of educative literature before, will be tempted if not actuated to make a trial of its virtues when he examines critically this particular magazine.
Osteopathic Physicians and Surgeons will manage all attention in the State; and the Materia Medica and Therapeutics. It does not comprise members of the healing art, three feet, open the terms and conditions, and 5000 dollars to the Secretary of the Board prior to January 1, 1919. Any person who at any time prior to January 1, 1919, shall pay to the Secretary of said Board the fee of twenty-five dollars and comply with the satisfactory proof of good moral character and of a resident one-year course of not less than one thousand hours in a legally chartered school approved by the Board, and satisfactory proof of three years of actual practice of a drugless system of the healing art, such three years of actual practice to have been in the State of California, shall be admitted to the drugless practitioner examination; provided, however, that in the event of a license being obtained to such applicant he will not be eligible thereafter for the physician's and surgeon's certificate without full and complete compliance with the terms and provisions of Sections 8 and 10 hereof. Any person obtaining a sixty-dollar license to the Secretary of the Board prior to January 1, 1919, and submits to the Board satisfactory proof of good moral character and proof of six years' actual practice of a drugless system of the healing art within three years of which must have been in the State of California, and satisfactory proof of a resident one-year course of not less than one thousand hours in a legally chartered school approved by the Board, and upon proof of competency in a drugless system may be granted a certificate to practice drugless system in this State; provided, however, that such licentiate shall not be permitted to take the physician's and surgeon's examinations without full and complete compliance with the terms of Sections 8 and 10 hereof.

REASONS FOR THIS AMENDMENT

The present law requires an examination in Materia Medica and Therapeutics. It does not specify what Materia Medica and Therapeutics, Regular, Homeopathic, Eclectic or Osteopathic. The Medical Board concluded to give three examinations in this subject, namely: Regular, Homeopathic and Eclectic. They have repeatedly refused to give the Osteopathic applicants a separate examination, such as is enjoyed by the applicants of other systems. This discrimination works a great hardship on the Osteopathic applicants because in addition to a knowledge of the subject, as taught in their own colleges, it is necessary for them to acquire a knowledge of the subject as taught by one of these systems. The Osteopathic applicant is compelled by the Board to choose one of the three sets of questions submitted. He may take his examination from a Regular or Homeopathic or Eclectic examiner, but is denied an examination in therapeutics from a member of his own school. The Homeopaths would very justly contend that the Medical Board was unfair if they were refused an examination in Homeopathy and compelled to take an examination in Osteopathy in order to obtain license. It would not alter the Homeopaths' opinion that they were not being treated fairly if the Board should say to them: "If you don't want to take the Osteopathic therapeutic examination, you may take that given by the Regulars or the Eclectics; but, we don't think you must either choose to be examined in one of the other systems or stay out of this State." The Homeopaths might with justice claim that the Osteopaths have been doing, that they are educated in their own system and expect to practice their own system and that therefore, it is a matter of public interest as well as one of justice that they be examined in the system which they intend to practice.

The injustice of requiring the Osteopaths who have been educated in their own system to take the therapeutic examination in another system in order to obtain a license to practice their own system is so obvious and so gross that it is hard to believe that seven men on the Medical Board could combine to do it. This is a striking example of the limits to which medical bias and prejudice will go when unrestrained by specific legislation. It should be noted that this amendment gives the Medical Board the option of giving either one or four examinations. All four schools of medicine agree on many therapeutic agencies and practices. Each school in addition has its own peculiar teachings. The Board can give one examination, limited to those things which are common to all schools of medicine, and no applicant can or will complain. Substantial justice will be served equally well by four separate examinations.

A Third Bill

ASSEMBLY BILL No. 933 likewise introduced by Mr. Merriam January 24, was referred to Committee on Medical and Dental Laws. It amends Section 912 of the present medical law by making it mandatory on the Board of Medical Examiners to issue Physician and Surgeon certificates to all holders of qualifications to practice Osteopathy, who, in addition to presenting this certificate, present a diploma from a regularly chartered school, and evidence of having practiced in the State for four years. Fee $25.

Precedent in California and all other States is evidence of the justice of this amendment. Standards have been advanced, all certificates to practice, issued prior to the passage of such act, have been declared to be of the same value as those issued under the increased requirements. There are M. D.'s in the State of California who have never attended a medical college, others who have graduated from two-year or three-year courses whose certificates to practice are recognized as Physician and Surgeon certificates. No Osteopath in the State has had less than twenty months of training and should have the same recognition by the law.

The present law requires an oral examination to determine whether the Osteopath is entitled to the Physician and Surgeon certificate. If this is just, why not have the M. D.'s who obtained their examination prior to 1913 take the same examination under the same conditions. A number of Osteopaths who obtained their certificates prior to 1913 took the same examination under the same conditions, and the M. D.'s whose certificate is recognized as Physician and Surgeon without further examination.

A Fourth Bill

ASSEMBLY BILL No. .... is to be introduced by Henry A. Miller and was referred to Committee on Medical and Dental Laws. It amends Section 17 of the present medical law so as to permit medical teaching institutions to give practical experience to undergraduates, this not being possible under the present law. As the law now stands, qualified students in medical teaching institutions and interns in State, County and Municipal hospitals who have no license to practice, are daily violating the law. This matter has been decided in the courts, and students, interns and institutions will constantly be in danger of prosecution, unless the law is amended.

Illinois Osteopaths Will Try to Rewrite Medical Practice Act

[From the Illinois Osteopathic Association Bulletin]
To Understand Why Osteopathy Conquers Influenza Read

A. T. Still, Founder of Osteopathy
By Prof. M. A. Lane

This Book of popular science tells in simple language about Infection, how the body creates its own Immunity against Infection, and how Osteopathy aids the body in its work of fighting Infectious Diseases generally.

Written for the lay public, it yet contains in easily accessible form much advanced information of inestimable value to the osteopathic practitioner. Indeed it absolutely is the most advanced and scientific statement of Osteopathy. Therapy that has yet been produced while as a popular statement of advanced Biology and Pathology there is nothing to touch it in the whole medical book field. Studied carefully, it will serve as a text and reference book of the greatest usefulness to the doctor himself.

Make yourself familiar with the facts and theories set forth in this work. Discuss its revelations briefly with your patients. Each of your good patients should be presented with a complimentary copy. Such thoughtfulness and generosity will pay you many fold.

Thinking people who have been brought quickly and safely through a siege of Influenza or Pneumonia by Osteopathy are interested to know why it works so successfully. This book, "A. T. Still, Founder of Osteopathy," gives the answer. You will find it a revelation to everybody that exact harmony exists between Osteopathy and the most modern scientific Laboratory Research. This fact, once understood, will advance immeasurably your prestige as a physician in the minds of your clientele.

The price of the book, well bound in dark green cloth, stamped in gold, is $2.00 delivered, postage paid. Order today. Feast on it tomorrow. Derive benefits in practice the day following.

The OP CO., 9 S. Clinton St. Chicago

THE OSTEOPATHIC PHYSICIAN

regulate the educational qualifications of practitioners, whether medical or otherwise, inasmuch as it seems impractical, if not impossible, to obtain any legislation which will apply to osteopathy alone. Our bill provides for two types of license, a license for those who wish to practice without surgery and a license for those who wish to practice with surgery. Those who wish to practice without surgery will be required in the future to have a high school diploma and in five years go to college and pass the examination for the State Medical Board. Those who wish to include surgery in their practice will require an additional year of study in surgery, and an internship which will require a second year, making a total of seven years for the full license.

This course, we believe, will meet with the approval of the vast majority of our members. It was thoroughly discussed at a Sunday meeting, at which a considerable number of representatives were present. Our original plan was simply to ask for the removal of some of the restrictions which are now thrown about our practice, but it seemed better policy to rewrite the Medical Practice Act from the beginning rather than to try the piece-meal method of amending the old act. We believe that sooner or later, surgery will be included in the practice of our profession in such a way that a license in one state will be valid throughout the United States. This thing of having to qualify in a new state every time a doctor moves is costly, troublesome, but is eminently unfair to all concerned.

Ohio’s Osteopathic Bill Reported for Passage in Both Houses

From the Bulletin of the Ohio Osteopathic Society

Our osteopathic bill before the Ohio General Assembly has been amended by the public health committees of both House and Senate and has been reported out of those committees and recommended for passage as amended. This bill carries what it is believed would be a long step forward for surgery and, therefore, on the calendars of both branches of the legislature reads as follows:

"Sec. 1288. The provisions of this chapter shall not apply to an osteopathic physician who shall take an examination before the State Medical Board in the subjects of anatomy, physiology, obeterics, surgery, and diagnosis in the manner required by the board, receives a certificate from such board, and deposits it with the probate judge as required by law in the case of other certificates. Such certificates shall authorize the holder thereof to practice osteopathy and surgery in the state, but shall not permit him to prescribe or administer drugs, except anesthetics and antiseptics."

No osteopathic physician holding a license to practice osteopathy at the time of the passage of this act, shall be permitted to practice major surgery, which shall be defined as the performance of those surgical operations attended by mortality from the use of the knife or other surgical instruments, until he shall have passed the examination in surgery given by the State Medical Board; but he may practice minor and orthopedic surgery not in conflict with the definition of major surgery in this act.

The certificate of an osteopathic physician may be refused or suspended as provided in Section 1252, General Code of Ohio.

There is no need of commenting at this time upon the virtues of this amended bill. That it goes farther in recognizing the degree of doctor of osteopathy than any bill we have ever been able to get is beyond question. That the bill is all that we might wish is not true, but being a long step in advance of anything that has ever gone before us, embrace it and spend the money to put forth every effort to secure its passage.

You, of course, are pleased with the bill too. You may not want to try surgery and, therefore, the enactment of this bill into law will in all probability not have any direct bearing upon your professional life. But is it not worth much to you to have those osteopathic that come after you that our degree should at this time rise to the dignified position of qualifying the holder thereof as a physician and surgeon? The phrase, "physician and surgeon" in the opinion of the public has always been and always will be representative of the scope of all medical titles. Of course, you are willing to get behind this bill with all the influence that you can muster. The public is with us in this fight if they but know it is on. It is your duty to let them know of it to secure the help of influential friends in your community to secure the early consideration and enactment of our measure into law. We cannot leave the burden of the whole struggle in the already overtried hands of Dr. Hulet and his associates. They already are making untold sacrifices of time and thought and necessarily because of their nearness and their committee responsibilities will continue to make sacrifices. You and we have the burden of the struggle and with your help we can all do our share and render them invaluable aid. Now get busy; it’s your fight; it’s my fight.

Nebraskans Expect to Have a Good Osteopathic Law

March 3rd

The Nebraska Osteopathic Legislative Committee met with a similar committee from the Nebraska Medical Association in conference on Senate File 89, March 12th, at the Lincoln Commercial Club. After exhaustive discussion, clearing up many misunderstandings between the two professions, it was mutually agreed that the objectionable word "minor" be stricken from the act.

A further amendment having reference to drugs was added to Section 4 of the Bill, as follows: "Provided that nothing in this Act shall be construed so as to Osteopathy in the State of Nebraska to be defined as a drug in the state of Nebraska by an osteopath of drugs, except anesthetics, antiseptics, antitoxins for poisons, and narcotics for the treatment of patients."

Both committees then went to the House of Representatives and submitted this amended bill to the Medical Committee of the House, agreeing that no further obstruction would be placed in the way of the passage of the bill. We feel that this will give us a splendid law with all the liberty for growth desired. It has also established a better understanding between the two professions, with correspondingly improved conditions of harmony. We trust the profession will feel satisfied with our efforts for we have done the best of which we were capable.-Fraternally yours, C. B. Atzen, D. O., Chairman, Legislative Committee.

THE PROPOSED NEW LAW

Engrossed Bill Senate File 89
Introduced by Senator Peterson.

A Bill for an Act to authorize and regulate the practice of Osteopathy in the State of Nebraska and to authorize the examination and licensing of Osteopaths or those who practice the profession of osteopathic physicians, is now before the Committee on that purpose.

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THE OSTEOPATHIC PHYSICIAN

Be it enacted by the People of the State of Nebraska:

Section 1. The Governor of the State is authorized and required to cause to be examined and licensed to practice all persons, who are residents of the State, following the profession of Osteopathy or desiring to follow the same, and for that purpose he is authorized and required within thirty days after this Act shall take effect, to appoint three examiners who shall be regularly licensed osteopathic physicians actually engaged in the practice of osteopathy in the State of Nebraska, and who have been so engaged at least five years immediately prior to their appointment; one of whom shall be appointed for the term of one year, one for the term of two years and one for the term of three years, and thereafter it shall be the duty of the governor to appoint or reappoint one secretary each year after one term theretofore appointed shall expire, but each examiner shall continue in office until his successors shall have been appointed. The Governor and said examiners so appointed shall be known and constitute the State Board of Osteopaths. Said Board shall have and use a common seal and make and adopt all necessary rules, regulations and by-laws not inconsistent with law to enable it to perform its duties and transact its business under the provisions of this Act.

Section 2. It shall be unlawful for any person, not licensed in this state previous to the taking effect of this Act, to practice Osteopathy and Surgery, or any of the branches thereof in this state without having applied for and obtained from the State Board of Osteopaths, a license so to do. Application therefor shall be in writing, and shall be accompanied by the examination fee hereinafter specified; and with proof that the applicant is of good moral character. Applications from candidates who desire to practice osteopathy and surgery shall be accompanied by proof that the applicant is a graduate of a school or college of osteopathy in good standing as hereinafter defined. When the application aforesaid has been inspected by the Board and found to comply with the foregoing provisions the Board shall notify the applicant to appear before it for examination and the time and place mentioned in such notice. The examination shall be of a character sufficiently strict to test the qualifications of the candidate as a practitioner. The examination of those who desire to practice osteopathy and surgery shall embrace all topics and knowledge which is commonly and generally required of a candidate for the degree of doctor or diplomat of Osteopathy by reputable schools in good standing as hereafter defined. All examinations provided for in this Act shall be conducted under the rules and regulations prescribed by the Board, which shall provide for a fair and wholly impartial method of examination. Examination may be desisted with by said Board, in its discretion, in case an Osteopathic Physician, duly authorized to practice osteopathy in any other state or the District of Columbia, if such state or district is maintaining a standard of qualifications equal to the standard maintained in this state, who presents a certificate or license issued by such state or district accompanied by a fee of Twenty-five ($25.00) Dollars. A special permit may be granted by the Board to an applicant deemed to it eligible but such special permit shall not operate beyond the date of the next regular or special examination held for the examination aforesaid. The State Board of Osteopaths may revoke a certificate for unprofessional conduct of the licensee.

Section 4. That on investigation of the proof submitted to the Board, and after examination, where examination is required, as hereinbefore provided, the applicant shall be found entitled to practice there shall be given to said applicant the certificate of said Board under its seal stating such fact; and it shall be the duty of the applicant, before practicing, to file such certificate or a copy thereof in the office of the County Clerk of the county in which he or she intends to practice. Such certificate or copy shall be filed by the
THE OSTEOPATHIC PHYSICIAN

County Clerk and by him recorded in the book kept for that purpose to be called the "Physicians Register" and for such service the County Clerk shall receive from the osteopathic school fees as are allowed to the Register of Deeds for the recording of conveyances. Said certificates shall contain a copy of the record of attendance of the applicant at the school or college of Osteopathy of which the applicant is a graduate, at the time of his attendance at such school, and then only in those cases and in the manner in which the applicant has been taught to use the same. Provided, that nothing in this Act shall be construed so as to authorize the administration by any osteopath of drugs, excepting anesthetics, antiseptics, antidotes for poisons and narcotics for the temporary relief of pain. Osteopathic physicians shall perform only such operations in surgery as was fully taught in the school or college of which the applicant is a graduate at the time of his attendance.

Section 5. Every applicant making application for an examination and a certificate shall pay to the Board the sum of $25.00. All such fees shall be equally divided among the examiners appointed under this act and making such examinations as full compensation for their services.

Section 6. Osteopathic physicians shall observe and be subject to all state and municipal regulations relative to reporting all births and deaths and all matters pertaining to the public health, the same as physicians of schools of medicine, and such reports shall be accepted by the officers of the departments to which the same are made.

Section 7. Any person who shall falsely represent himself to be a qualified osteopath or shall practice or attempt to practice osteopathy or use the science or system of osteopathy in treating the diseases of the human body without having first complied with the provisions of this article and obtained a license to so practice, shall be deemed guilty of a misdemeanor, and upon conviction he shall be fined in any sum not less than twenty-five dollars or more than one hundred dollars, or be confined in the county jail not less than three months nor more than six months.

Section 8. The term school or college of Osteopathy in good standing shall be defined as follows: A legally chartered osteopathic school or college requiring three years of college training, and if such examination shall be conducted by the Board the same shall be divided among the members of the Board making such examination as full compensation for their services.

Section 9. Any candidate for license or certificate to practice Osteopathy in this state may be permitted to submit himself for examination in those subjects completed at the end of the second year of college training, and if such examination is satisfactory and discloses that the applicant has mastered the subjects covered by such examination he shall be given credit therefore on his final examination. The applicant before taking the examination shall pay to the Board an additional sum of fifteen dollars, which shall be equally divided among the members of the Board making such examination as full compensation for their services.

Section 10. That Sections Nos. 2788, 2789, 2790, 2791, 2792, 2793 and 2794 of the Revised Statutes of Nebraska for 1913, and all Acts and parts of Acts in conflict herewith be, and the same hereby are repealed.

Contributors of the Nebraska Osteopathic Association, office of Secretary Dr. B. S. Peterson, 604 Brandeis Bldg., Omaha, Nebraska.

The Toronto World Pleads for Justice to Non-Drug Medicine

[Editorial in the Toronto (Canada) World, Feb. 14th]

It is rumored that the government, in its new bill dealing with the drugless healers, may fall into the error of treating osteopathy, chiropractic and their associated developments as branches of the drug profession, refusing to recognize them as separate professions, but setting a chair apart for these sciences as one subject, compelling the osteopathic student to take an ordinary medical course and having him devote a few lectures a week to the subject that occupies a full four-year course in the standard osteopathic college.

A parallel to this would be to declare that theology is simply a branch of the arts faculty, and compelling the theological student to submit to having their theological training confined to a few lectures in an arts course, instead of spending the regular course at a theological college.

Hon. Dr. Cody would not tolerate this for a moment and it is inconceivable that he would permit such an outrageous violation of the identical principle as applied to the osteopaths.

How "Bad" Mechanism in Our "Joints" Makes Sickness

A well illustrated number showing how osteopathy adjusts the human machine at its joints especially. A simple but careful explanation of the relations of the bones, muscles, tendons, ligaments, cartilages and nourishment to the nutrition of the entire body. The big argument for osteopathy. Price $4.00 a hundred.

OP Co., 9 So. Clinton St., Chicago.
appetizing and well planned. W. Frank Powers, senior, acted as toastmaster. The courses were interrupted by very well placed and snappy toasts. Dr. Comstock, college dean, spoke of the "Power of Will" in accomplishing worth-while undertakings, and cited, as a very good example, the great success attained by the Chicago College of Osteopathy.

Mrs. O. C. Foreman rendered several piano selections. Dr. Geo. H. Carpenter, president of the Board of Trustees, spoke of the extensive and expanding scope of osteopathy. Each of the classes were represented by speakers. Dr. Frank Sherman of the class of 1918 recited some splendid original verse apropos of the occasion. Miss Gene McKenzie entertained with two very pretty solo dances—"The Pierrette" and "The Semirock," assisted by Miss Anne Fielding at the piano. Miss McKenzie is a representative of the Chicago Normal School of Physical Education.

After the inner-person had been satisfied, all adjourned to the ballroom. Grant's six-piece orchestra played. Mrs. Grant conducted the cotillion, several other novelty dances and distributed favors.

All who attended were more than glad to be among the party. Those who did not seize the opportunity have solemnly resolved that they shall not lose the chance to attend the next Junior "Prom" in 1920.

A Home Letter from Uncle George
Still to the ASO Family
Everywhere

UNLESS you have been back to the school or hospital quite recently, you do not realize the changes and improvements that have been going on. The war put a big crimp in both school and hospital work, but it is now over and prospects never looked brighter. We were not for the bad legislation in many of our states, we could say that the outlook was the best it ever was.

My special object in writing this letter is to call your attention to the offer of the ASO Hospital to handle surgical conditions for returned soldiers free of charge. Making this announcement, thru your local paper, will be the best bit of advertising, to my mind, that you can do for yourself. Like other recent publicity items, it will open their eyes to some of our good points.

Incidentally, I want to call your attention to the following points about the hospital itself. Aside from the school and infirmary, we now operate three different buildings as ASO Hospitals, and in addition have a fine brick building being erected for a nurses' home. We have one institution specially arranged to handle the better class of obstetrical cases.

We have five graduate registered nurses super­intending the training school and nursing. We have 35 nurses. We have the largest Nurses' Training School outside the large cities in the state.

We have twelve physicians, specialists in their line, in charge of various departments and activities. In addition we have six other graduate physicians who give their entire time to the treatment of the post-operative cases. We can also call into consultation any of the ASO Faculty, not on the hospital staff, when desired.

We believe we are better equipped to give the patient individual attention than any place in the country.

We are most certainly a growing institution—A nurses' home. We have one institution specially arranged to handle the better class of obstetrical cases.

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you are not a subscriber to *The Journal*, you will be surprised to see what an improvement it has made; while if you are a subscriber you already know.

A prominent osteopathic speaker at Chicago recently said that the end of osteopathy was in sight. Doctor, we ask you to drop in, with your next patient, and look the school and hospitals over, then tell us what evidence you see of extinction. Nothing to it. Already sixty-three of the soldier boys are back in school, and in September we are going to have a record class. Since our record with the “flu” and pneumonia, better say “the end of medicine is in sight.” The “flu” didn’t hurt him. It helped kill drugs. To hell with croakers.

Yours for the kind of osteopathy that won’t quit.—George A. Still, Kirksville, March 1, 1919.

**No. 17**

The Osteopathic Catechism

Everyday Questions and Answers that Pass Between Patient and Practitioner

(PART 1)

**No. 21**

Osteopathy: Synonym of Surgery

A Lame Back Cured by Splints

A Typhoid Spine Cured

A Disabled Wrist Restored to Usefulness

Intercostal Neuralgia Caused by a Slipped Rib

Sagging Stomach or Gastritis

**One More Boost for Chronic Practice**

Sixteen different ills, mostly of the common chronic type of cases that come to us for office treatment, are discussed in the current (May) installment of *Osteopathic Health*. These constitute a very strong presentation for building up chronic practice. The issue is called “Osteopathy a General and Specialty Practice.”

You will admire it for its marked simplicity and absence of high-flown language and technical discussion.

You will be quick to recognize that this talk about many common diseases (which osteopathy treats will signal success) is a good and proper reaction after the excellent series in flu-pneumonia discussions which we have printed the past six months. We hold that those epidemic numbers constituted the best advertising opportunity the profession ever had, but naturally the time is now ripe to resume hammering home the truth that osteopathy is a general therapeutic practice and treats equally well ills chronic and acute, ills of general and specialty practice alike. This number hammers this truth home and will be very influential in spreading information about osteopathy and building up good will for our practice wherever those flu-pneumonia numbers have circulated.

As we have pointed out many, many times before, Osteopathic Health is not merely a booklet, but is an advertising service. It is studiously and artfully designed to take advantage of matters of news interest, such as the recent epidemic, which people are deeply interested in and will read about, to carry information as to the nature, scope, work and success of osteopathy. Its usage catches adherents to osteopathy in great numbers who would probably not have their attention caught by messages about chronic ailments. But as soon as attention is flagged, and the lesson well taught, it swings back to explain the meaning of adjustment therapy to the common and chronic ills of every-day practice.

Therefore we urge that our friends who specialize in chronic work make a mistake and lose a great opportunity to evangelize for osteopathy and win new adherents for their own office practices who fail to use our acute disease issues when they appear in series.

This May number, however, will appeal to all who always like and use general practice numbers, chronic practice numbers, and specialty practice numbers. Pray, take a look at it and give it the adoption and sanctification of usage that it deserves. Osteopathic Health is a complete and successful advertising service and when accepted and used as such twelve months through the year it pays the user in actual check-uppable accomplishments much better than when he breaks the cumulative force of our campaign and uses only as separate pamphlets such occasional issues as happen to meet the ideas of the doctor himself. Such a course minimizes the value of the magazine a great deal. It is like a patient compelling his osteopath to cut out such adjustment work as may hurt him and give him only the kind of treatment that is immediately agreeable and pleasant. As long as you are the doctor give a patient what you know he needs; and as long as you are buying an advertising service accept and make full use of such advertising brains as your doctor of publicity and promotion is presumed to possess by virtue of being in the business. If he hasn’t got the brains, he deserves to be cut out altogether.

—Henry Stanhope Bunting, Editor.

*OH* A Popular Winner

I want to congratulate you on the splendid way you are handling the disease fullest. To me it is the greatest work ever done to show the public the value of osteopathy as compared with allopathy.—R. W. Patterson, D. O., Louisville, Kentucky.

The past issues of Osteopathic Health have been very fine. Dr. Bunting is cracking the whip at the right time. Hamper away and never give up. For everybodies’ sake let’s educate the public.—C. L. Larson, D. O., Zumbrota, Minnesota.

My Dear Brother Bunting: You’re coming down the Home Stretch. Twenty years of your hard work is finally paying off. Judge our class well coming true.—Rah! Rah! Rah! A. S. O., June ’91. Drugs must go.—Dr. Eugene Pitts, Bloomington, Illinois.

Please send me 500 extra copies of *Osteopathic Health* for March; 500 with card and 100 without card. It is an excellent number and should have a wide circulation.—Robert W. Rogers, D. O., Summerville, New Jersey.

After reading and rereading your booklet on “The Day of Therapeutic Reckoning,” I concluded it would be wrong not to supply each of my patients with a copy. You may send me 100 copies with card and 100 without card.—S. B. Grasso, D. O., Quincy, Illinois.

I want 100 copies of “The Day of Therapeutic Reckoning,” as I want to add fuel to the fire of public interest that has already been started.—Dr. P. T. Crobin, Anadarko, Oklahoma, February 17.

The March issue of Osteopathic Health is sure a wonderful piece of educational literature. I have tried to get along without *OH* for the past few months, but find it impossible. Therefore I am signing an annual contract for 150 copies monthly.—G. H. Miller, D. O., New Hampton, Iowa.

The December and January issues on influenza stirred up quite a sensation in some quarters in my community. I want 100 copies of “The Day of Therapeutic Reckoning,” as I want to add fuel to the fire of public interest that has already been started.—Dr. F. T. Crobin, Anadarko, Oklahoma, February 17.

The February issue of Osteopathic Health entitled “The Day of Therapeutic Reckoning,” was the best ever. *OH* is getting better all the time. What do you do if you dig up such material? I am connected with oil and different mining companies and this you send out beats them all. Keep them coming. We are taking 1,500 copies of the above.—L. A. Howes, Ord, Nebraska.

The February issue of Osteopathic Health entitled “The Day of Therapeutic Reckoning,” was the best ever. *OH* is getting better all the time. What do you do if you dig up such material? I am connected with oil and different mining companies and this you send out beats them all. Keep them coming. We are taking 1,500 copies of the above.—L. A. Howes, Ord, Nebraska.

Osteopathic Health, issues of November, December, January and February, have been exceptionally good. Dr. Bunting is a real asset to the osteopathic profession, especially so when he preaches such good gospel as is found in the “flu” issue of Osteopathic Health. It is unfortunate that these splendid brochures have not been given out more generously in all sections of the United States. Surely the past few months was the accepted time to reach the American public with such literature.—A. H. McNicol, D. O., Dixon, Illinois.
Flu Victims Maltreated
Buffalo, S. D., Residents Narrowly Escape Death

INOCULATION IS BUNGLED
Serum of Doubtful Medicinal Value Is Injected Into Patients' Breasts, Resulting in Blood Poisoning by Nearly Every Dr. Nutting, said

I NFLUENZA vaccine, improperly administered and perhaps of no medicinal value, actually cost the lives of nineteen people at Buffalo, Harding county, S. D., it became known yesterday. One of those most severely affected was taken to a hospital at Miles City, Mont., and Mr. and Mrs. Bowers and Mr. Gilbert were also at Buffalo. Others were still ill when hospitals are as soon as they can travel.

Gilbert's Condition Was Critical
Mr. Gilbert, owner of several sheep ranches, was one of those most severely affected. For more than two weeks he lay at death's door and has been ill more than eight weeks. Before admission, he had about 200 pounds, having lost about 60 pounds through the illness. A baby son of Mr. Gilbert's recovered under Dr. Nutting's care.

Patients Are Improving
The three now at St. Joseph's have made some improvement under the care of Dr. W. T. Conley, and Mr. Bowers, who formerly was connected with the Moore-Shenkton Company, hopes to arrange matters for the remaining sufferers at Buffalo to be brought here.

The plight of the victims of the alleged malpractice, said Mr. Bowers, was further fraught with danger than that of Dr. Conley's patients. When the first injection of the vaccine had over 1,000 people had suffered from alleged malpractice of a Camp Crook, S. D., physician, and a Belle Fourche, S. D., nurse, will be brought here for treatment, with the exception of a few now in a hospital at Miles City, Mont. Mrs. Bowers and Mr. Gilbert, a prominent sheepman, bankr and nurse in Camp Crook, are in a serious condition. Physicians have pronounced the vaccination of the afflicted persons a little short of criminal carelessness or ignorance.

Buffalo, a village of about 150 people, is fifty-five miles from the railroad line at Bowman, N. D., with the thermometer from the nearest doctor, at Camp Crook, S. D. The only communication with outside points is through a stage line running to Bowman.

Nineteen Persons Inoculated
With the roads made by influenza in Harding county, a Camp Crook doctor was called to Buffalo, where he inoculated nineteen of the residents with the serum or vaccine to render them immune to the disease. The serum, obtained from Indianapolis, Ind., is said to be of a brand but little known to physicians. Four injections of the vaccine were made on each patient, the doctor charging $2 for an injection and $1.50 a mile for the distance traveled, twenty-seven miles.

Due to the fact that the doctor was intoxicated, according to the allegations of the patients now in Sioux City, the inoculations were administered by the nurse through the breasts, which Sioux City physicians say is theoretically an unsafe and unscientific method. The puncture left by the instrument in practically every case resulted in a festering sore, turning to blood poisoning.

Almost before the patients had received the stipulated number of inoculations they were taken violently ill. The poison, quickly springing through their veins, attacked the kidneys and other vital organs. Despite the alarm of the families that something was amiss, the nurse repeatedly stated that the serum was properly functioning. When attempts were made to again procure the services of the Camp Crook doctor, he was found and had left for Chicago and the nurse, it is said, deserted her patients a short time later.

Big City Physicians Busy
Appeals for medical aid were sent to Sioux City, Omaha, Minneapolis and other cities in the middle west, but the appeal went unanswered until Dr. W. W. Nutting of Bowman, N. D., learned of their dire straits and drove fifty-five miles to Buffalo, with the thermometer seven degrees below zero and bad road conditions, over what is known as the worst road in South Dakota. He had been in the business so long that he knew from its effect on those who traverse it.

Working with what is characterized as nearly superhuman energy, Dr. Nutting, said to have consistently exposed and denounced the vaccine used had not been properly sterilized.

Serious illness of several people at Britton, S. D., was caused by the same method of inoculation, said Dr. W. T. Conley.

WHAT WE CAN DO TO PREVENT SUCH MALPRACTICE
This is the kind of ignorant and criminal practice which Osteopathic Health and is, therefore, so consistently exalted and denounced for being just what it is—charlatanry and malpractice, which ought to be forbidden by statute.

The Sioux City Journal naively explains that this situation was so serious because nobody in Buffalo, S. D., thoroughly understood drugs.

It would have been just the same if "the druggist and doctor" of Buffalo, who had gone to town, had both been honest. Neither they nor any practicing physician in South Dakota or the entire United States would for a moment understand the nature and actions of the vaccine or serum "received from Indianapolis." The person who prepared it did not have such knowledge. The only persons who would partially understand these matters are the life-long laboratory technicians, who have given years to investigating these problems. They have not printed their revelations in any other journal than Osteopathic Health and is, therefore, so consistently exalted and denounced for being just what it is—charlatanry and malpractice, which ought to be forbidden by statute. They have not printed their revelations in any other journal than Osteopathic Health and is, therefore, so consistently exalted and denounced for being just what it is—charlatanry and malpractice, which ought to be forbidden by statute.

Dr. Conley said last night that inoculation through the breast was a method to be deplored, and also stated that there was as possibility the vaccine used had not been properly sterilized.

The doctor responsible for the illness and escape from death of the village residents will be prosecuted to the full extent of the law, it is asserted. Both Mr. Bowers and Mr. Gilbert expressed themselves forcibly concerning the doctor's and nurse's actions.

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in The OP and Off series of documents the past four years on the authority of research scientists, I can assure you that the fact is absolutely convincing. And every community that was swept by the "flu" ought to be taught with this truth and the helpful health information. Nor will osteopathy ever come into its own until such facts are pounded into the public mind until they have become part and parcel of the every-day thinking of mankind.

We are giving you facts in Osteopathic Health—facts that conclusively put the facts containing nothing, in every community, and the facts that will be taught in the schools. I have no use to do this unless more than half of our profession report it. There is no need to report from your state, and the number who have not reported. I urge every State Committee to see that his State makes a better showing. If you have done nothing, report them, but be sure and mark the report supplementary.

The main thing is to get a report from every osteopath, member and non-member alike. Perhaps when the other three reports reached you you would be in a position to write to the editor to say that the state of Illinois is acting. No calls were made from your state, and the number who have not reported. I urge every State Committee to see that his State makes a better showing. If you have done nothing, report them, but be sure and mark the report supplementary.

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Dr. A. B. Ekomi, from 1432 Jackson Blvd. to 1105 E. 45th Pl., Chicago, Ill.

Dr. E. J. Bartholomew, from 64 E. Jackson Blvd. to 1310 S. Lake St., Chicago, Ill.

Dr. M. A. Bauer, from 2127 High St. to 424 Peoples Building, Delaware, Ohio.

Dr. C. Wood, from Davis Block, Pontiac, to 49 Virginia Park, Detroit, Mich.

Dr. J. R. Bell, from 283 Eliza St. to 1310 S. Seventh Ave., Maywood, Ill.

Dr. A. B. Hyman, from 177 Wardell road to 283 Eliza St., Sydney, Australia.

Dr. A. E. Horning, from 80 Bloor West, Toronto, to 415 S. Stanford St., Chicago, Ill.

Dr. Frank E. Sampson, from 415 S. Stanford St. to 1211 E. Scott St., Kirkville, Mo.

Dr. Henry H. Christensen of Pender, Nebraska, and Dr. Pauline Lenore Walker of Schaller, Iowa, on April 3 at Schaller, Iowa.

Dr. John E. Lynd, from 1310 S. Seventh Ave., Maywood, Ill. to 18 E. 41st Street, New York, N. Y.

Dr. C. E. Amsden, from 1410 H St., N. W., Washington, D. C. to 504 Fine Arts Bldg., Detroit, Mich.

Dr. T. J. Ruddy, from 204 Pennsylvania Building, River Grove, Ill., to 204 Pennsylvania Building, River Grove, Ill.

Dr. Percy Evan Roscoe, Osteopathic and Minor Surgery 601 Guardian Bldg., Cleveland, Ohio.

Dr. C. King, from 228 Woolner Building to 610 S. Sixth St., Columbus, Ohio.

Miss Pauline Lenore Walker of Schaller, Iowa to 601 Guardian Bldg., Cleveland, Ohio.


Dr. F. S. Hubbell, Osteopathic, Orbital and Fingertip Surgery, 39 N. Orange Ave., Orlando, Florida.

Dr. James W. Robb, Osteopathic Physician 604 Fine Arts Bldg., Detroit, Mich.

Dr. Preston R. Hubbell, Osteopathic Physician 601 Guardian Bldg., Cleveland, Ohio.

Dr. C. J. Howell, Osteopathic, Orbital and Fingertip Surgery, 3 N. Orange Ave., Orlando, Florida.

Dr. C. P. O. & S. Los Angeles, Cali.

DR. C. E. Amsden, Osteopathic Physician 625 Main St., La Fayette, Ind.

Dr. J. C. Head, Osteopath, Orbital and Fingertip Surgery, 39 N. Orange Ave., Orlando, Florida.

Dr. J. C. Head, Osteopathic Physician 310 S. Sixth St., Columbus, Ohio.

Dr. C. C. Wendell, Osteopathic Physician 408-9-10 Chemical Bldg., St. Louis, Mo.

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Patients Treated!
Less Than One in Every Hundred Patients Died from Both Diseases Combined
Research Scientists Discredit Drugs, Vaccines and Serums in Influenza and Pneumonia
"Shot-Gun" Vaccines are Pure Charlatanry
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makes satisfied patients. A patient who knows why osteopathy is successful is a real booster for you. A booster means new patients.

No. 29

The Day of Therapeutic Reckoning
An Indictment Must Now be Drawn against "Regular" Medicine for Its Responsibility for an Increased Death Rate in the "Flu"-Pneumonia Pandemic
Osteopathy Reduces Allopathy's Influenza Mortality 99% and Its Pneumonia Mortality 66 2/3%!
This Alleged "State Medicine" Has a Strangle-hold About on People and Government in the United States and Canada

No. 31

Preventing the Common After-Effects of Influenza
1. Heart-Weakness After "Flu" a Great Peril
2. Other Evil After-Effects are: Tuberculosis, Paralysis, Neuritis, Melancholia, Earache, Despair, Digestive Troubles, Nervousness, Insomnia, Persistent Debility
3. After-Effects in Part the Result of Drug Treatment
4. Osteopathy Successful in Countering all Such Conditions Following Influenza
5. Foremost "Regular" Authorities Admit that Drugs Do Not Cure Influenza and Pneumonia.

Osteopathic Health will increase your practice. It will keep your name and profession fresh in the mind of a cured patient or prospective patient.

Osteopathic Health for May, 1919
A Brief Survey of the Wide Applicability of Its Adjunctive Therapy to the Relief of Ill Chronic and Acute

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