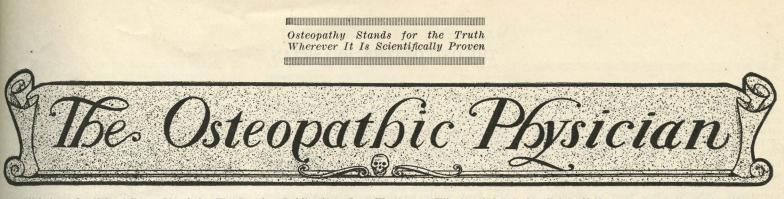
The Osteopathic Physician

# May 1922

# Vol. 41, No. 5

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Volume XLI

WAUKEGAN, ILL., MAY, 1922

No. 5

# Post System Foot Adjustment — Great Professional Opportunity

S. L. Scothorn, D.O., President AOA, Dallas, Texas

After six months of careful investigation the AOA has made a contract with Mr. H. A. Post whereby the use of his appliance and his technic-which is osteopathic both in principle and practice, and which is entirely different from anything we have ever done-cannot be taught to any one except Osteopathic Physicians. That the Post System is everything that is claimed for it is proven by investigations made and by clinical experience demonstrated on Osteopaths and their patients since Mr. Post has been conducting Post Graduate courses under AOA auspices.

It is now up to every member of the AOA to get back of this project. It should be supported to the limit because it means first, a wonderful boon to humanity; second, enlargement and improvement of osteopathic technic and efficiency; third, opportunity for greatly increased income for the practitioner and a chance to make the AOA financially independent. We must fulfill our contract with Mr. Post—which should be done easily in a short time if the profession gives the right support—and then put the proceeds for Post Graduate Instruction and territory rights into AOA treasury.

The technic cannot be adequately explained in words. It must be demonstrated. It is simple and any Osteopath can quickly grasp it once the method is explained to him and he sees the work done. A better illustration of Dr. Still's maxim "Find it; fix it; and leave it alone" could not be desired. The efficiency of the system and the extraordinarily quick and gratifying results can best be impressed by quoting letters from some well known Osteopaths who have investigated the work:

## FROM ASA WILLARD, D.O.

I have seen and taken the work of Mr. Howard A. Post, Foot Specialist of Oakland, California, and he convinced me after he had treated one patient; convinced me rather against myself. The first patient he treated before me was a prominent lawyer, a man who appears before the Montana Supreme Court more than any other man in Montana. After one treatment, which I could easily comprehend, this gentleman was able to raise himself on his toes, and expressed himself that he had not been able to do that at any time during the past two years, and his feet felt correspondingly good. My doubts have been changed to enthusiasm. The work is thoroughly osteopathic and of a most specific nature. It is just the same work as the "Old Doctor" used to do, but the device makes possible a better application of force than can be accomplished with the hands alone.—Asa Willard, D.O., Missoula, Montana, March 18, 1922.

## FROM M. E. CLARK, D.O.

To the Ohio Osteopathic Physicians: Dear Fellows: Will you kindly give Mr. Post your earnest attention when he gives his foot demonstration? I believe he has something that we all need. The best indication that I myself believe in it, is that I have signed the contract and am taking his course. The patients that he has treated here are very enthusiastic and some have even said that they would go to California to get the treatment if they could not get it here. I was very skeptical at first and



Dr. Francis A. Cave, Executive Director of the Physico-Clinical Institute, Inc. of Boston, where ERA Is Taught as Authorized and Endorsed by Dr. Abrams.

told Mr. Post that I had lived in Missouri for ten years and would have to be shown. I must admit that he has not only shown me, but like they say in Texas, "he has put it in my hand." -M. E. Clark, D.O., Indianapolis, Ind., Jan.5, 1922.

## FROM M. A. ENGLISH, D.O.

My dear Mr. Post: When Dr. Scothorn came into my office the afternoon of April 26th, to ask me to attend your clinic that evening, I told him that I was unable to do so because I had an important engagement. He told me, however, that he was going to sit right there until I promised to go, so in order to get rid of him, I cancelled my previous engagement and attended your clinic. When I saw the work that you are doing I immediately recognized it as specific Osteopathy and decided then that I would take a half or all of the rights for the District of Columbia, if necessary. As you know, I did not get a chance to do this as fifteen out of the twenty-six members of the local osteopathic association have taken your work. You will recall that you saw and treated with me, Thursday afternoon, sixteen cases. I am sure you will be pleased to know that ten of these are taking the treatments at \$100. per. There will probably be two or three more of them coming in soon as they have the matter under consideration. As the patients are coming back for their second treatment, most of them are reporting improvement. I feel that you are doing a wonderful service for the Osteopathic profession, as these cases have been very difficult, and in most instances, not cured, and you surely are doing a wonderful service to suffering humanity in developing a method to relieve this particular ailment.—M. A. English, D.O., Washington, D.C., May 6, 1922.

## FROM C. D. SWOPE, D.O.

My dear Mr. Post: Undoubtedly you will recall the young lady that you saw on Thursday, who was complaining that her foot felt worse. I saw her today and she was very much chagrined at her behavior the other day, as the foot is much better and is coming around in just the fashion that you had told her it would. I am much more enthusiastic about the work since I have been treating entirely on my own responsibility. Unquestionably this system will move an individual bone; so with proper application, must give results. The technique is so simple and direct, that in treating these cases you can so easily demonstrate the osteopathic principle. I cannot see how this can be anything but the greatest help to our practitioners, as it will certainly reduce all foot work to specific manipulation.—C. D. Swope, D.O., Washington, D.C., May 5, 1922. Dr. W. E. Waldo, of Seattle—who suffered

Dr. W. E. Waldo, of Seattle—who suffered from flat feet for years—took the treatment and was so benefited that—finding the Osteopaths of Seattle slow in agreeing on contract he took for himself the rights for the city, financing the entire deal personally. Dr. John H. Bailey of Philadelphia took two treatments at the Atlantic City clinic. He told

Dr. John H. Bailey of Philadelphia took two treatments at the Atlantic City clinic. He told me afterwards that if my administration as president of AOA did nothing more than introduce this system to the profession it would be famous in history of Osteopathy for all time.

Dr. John J. Howard of Brookline, Mass., came to Washington especially to see the work demonstrated. Finding that Mr. Post could not arrange immediately to visit New England and conduct courses, he put up at once his own check for \$1,500 to cover rights in his town.

That the financial rewards possible from this work are very high is indicated in letters quoted. I can state some further enlightening information about this. Previous to making contract with AOA Mr. Post had sold rights for Los Angeles and Kansas City to laymen. The man in Kansas City is making \$5,000 per annum and has offered \$20,000 for Chicago rights. The man in Los Angeles holds his contract rights at \$50,000. Dr. Asa Willard and Dr. McCole bought the rights for Montana. Before they were through treating the patients who came to the clinic while Mr. Post was giving instructions and demonstrations they had paid off the entire amount due on their contract and had besides \$225. in the treasury! Mr. Post is under contract with AOA and works exclusively under its auspices. We are sending him to different cities to give post graduate work. The fee for the course of instruction and territory rights is in proportion to the possible field of practice in the district. One Osteopath or a group of Osteopaths may buy the rights for a territory. The first opportunity is always offered to the group. The larger the group the less the expense to each individual. The possible field of practice is computed by the population of the city or territory for which the contract is to be made.

Under its contract with Mr. Post the AOA must pay him a stipulated amount and then the system becomes the exclusive property of AOA without further payments or royalities. We can do this easily and quickly if Osteopaths everywhere grasp the great opportunity now opened up. When Mr. Post is paid off the post-graduate courses should be continued on the same basis for the profession but the entire fees therefrom would go into the AOA treasury thus creating a source of income which in two or three years would make the AOA financially strong and independent. I earnestly beseech all AOA members to get back of this project and boost it. Let there be no back-fires, wet blankets or counter proposals. The thing is good—tremendously good! If you can't boost, DON'T KNOCK! Dr. Herman F. Goetz of St. Louis—one of our oldtime, stalwart bony-lesion, specific technic practicians and a most difficult man to convince by mere enthusiasm—sat for twenty minutes without saying a word watching keenly every move of Mr. Post while he demonstrated his technic. Finally he said, "Boys, he's got it! He has accomplished something we have been trying for twenty years to do. It is different from anything we ever did—but it's Osteopathy!"

It is only about two weeks since I met Mr. Post in St. Louis and arranged to visit with him certain cities. Already, as a result, the work has been taken by Osteopaths of St. Louis, Washington (D.C.), Columbus, Chillicothe (Ohio) and Orange (N.J.). Mr. Post's demonstration of technic at the Eastern Convention, Atlantic City, was enthusiastically received. He will appear on the program of AOA at Los Angeles.

# How Do You Put In So Much Time In the Treating Room?

F. P. Millard, D.O., Toronto, Ont., Canada

We have received a great number of letters regarding the article in the April OP, and we are going to try and make this number of more interest than the first, if possible. Our mail is heavy; we receive letters from every part of the country; we have received letters from England, Ireland, Scotland, and two letters from Vienna, Austria, the home of the famous Lorenz, inquiring about spinal curvature. National League for the Prevention of Spinal Curvature is known all over the world. References to the Contest have been made in the papers in all countries, I believe. Now, we want to make good use of this National League and establish clinics, so that we will have in a few years a great number of clinics, and back up Osteopathy by public sentiment, which is always in favor of Osteopathy when we do free clinic work. We have a great many letters, also, regarding lymphatics, and we enjoy all of these letters, and so far we have answered every one, as far as we know. We find that we have time to do this, outside of our heavy practice: we also find that treating thirty or forty children, early in the morning twice a week, simply stimulates us for a good day's work.

## PUT YOUR SOUL INTO YOUR WORK

If you put your whole soul into your work, it will be a pleasure, and will not tire you. In order to accomplish this, however, the doctor must keep himself in the best of trim; he must secure regular sleep; he must have a smiling face and be keen in his work. It is necessary, in our practice, to make a good personal appearance, and also to keep ourselves in the best of trim and appropriately dressed. It is necessary to take a hot bath every day and invariably change the underwear every day; also, shirt and collar. Patients appreciate tidiness, and they look to their Doctor as an example of We find that cleanliness and right living. patients are perfectly willing to pay for their treatment, and buy you everything that is necessary, if you will do the work. They will supply you with all necessaries for life and be pleased, besides, to see you enjoying them the best of clothes, automobiles, Havannas, and everything that you desire if you will only make them well once more. After all, our patients buy us everything. They supply all of our needs, and we are indebted to them to that extent. It is up to us to give them our

best attention and the very best service that we can render.

## SOCIAL LIFE OF THE DOCTOR

A great many doctors seem to think that they must enter into the social life in their town or city, in order to have a practice; that their wives must go to all of the teas, play bridge, and join in the dances, also do church social work, in order that she may help her husband in becoming established. That viewpoint may be alright for some, but I have always held that a Doctor should be perfectly capable of handling his practice and commanding respect if he simply tends to business and does not spend too much time in social affairs. It is alright for a diversion, if one is so constituted, but I find the greatest pleasure, outside of my office work, is in research work and home study; in answering letters, writing articles and books; keeping myself posted so that I may be more able to do my work during the day in the best possible manner.

In writing a series of articles of this nature, it is quite necessary to make personal references, and in doing so I will ask your indulgence in order that we may more thoroughly enter into the spirit of this discussion.

## SEPARATE TREATMENT ROOMS

I am a great believer in separate treatment rooms. I believe that changing from one room to another rests one, and that one central treatment room, with several adjacent dressing rooms, makes one tired, as the doctor confines himself and concentrates too closely under certain specific centralized conditions.

In going from one room to the other, you can refresh yourself with a drink of cold water, wash your hands and go into a new room under different surroundings. This has been of great value to me and my work, where we handle so many cases a day. Sometimes, of course, there are two people in one room, and this takes a little more time, but, as a rule, there is but one person in a room and the length of the treatment is sufficiently short to not tire either patient or doctor.

## LENGTH OF TREATMENT

We spoke in our last article regarding length of treatment. We thoroughly believe that a great deal of time is wasted in conversation. If you train your patients so that they will be prepared for their treatment as soon as you enter the room, you waste no time; in fact I have started to treat a patient—yes, almost half treated him—before saying a single word One of the greatest points in handling a practice is to so concentrate your mind on your patient's troubles that you will be able to remember each of those symptoms the next time you have a treatment. This may not be possible for everyone, but if you will take suffcient interest and be sufficiently observant, and an eager listener, you will be able to tabulate these various symptoms in your mind so that you will recall, without referring to your clinic sheet, almost all of the details; in fact, I never take the clinic report into a room, nor do I look up a clinic report before treating a patient.

## LYMPHATIC EXAMINATION

We will refer first to examination. After taking blood pressure, heart action, and going over the chest with a stethoscope, we make our lymphatic examination. I want to tell you right now that one reason I am able to handle so many cases in a day is because of my lymphatic training and findings. You will soon realize when looking for symptoms from a lymphatic standpoint that you are better able to understand the patient's condition after making a lymphatic examination than you are from any other method. Those puffy areas, scattered throughout the body in the majority of cases, indicate certain things, and you may base your findings upon this lymphatic examination in a most accurate manner; you will be surprised, in two or three year's time, after becoming thoroughly familiar with the lymphatic phase of the work, to find that certain disturbances in the body are traced more accurately by observing the lymphatic findings than by any other method.

No organic disturbance exists without a corresponding lymphatic involvement, and if you will watch the ebb and flow, so to speak, of the lymph flow, you will be amazed how certain areas invariably indicate internal disturbances by superficial lymphatic manifestation, not always in the way of enlarged nodes, but various symptoms that indicate themselves by a blocked lymph flow. If you will study the lymphaties thoroughly for two or three years, you will find that you will be amply rewarded for your trouble, will be able to diagnose more accurately than ever each case that presents itself for examination and treatment.

After your lymphatic examination, proceed with your examination of the osseous tissue. We need not tell Osteopathic Physicians how to make an examination of the spine and the various joints. That is quite unnecessary. We all have our various methods of diagnosing and making findings. We all have our ways of making clinic reports; what we are trying to do, in outlining work in this article, is to show some how to be economical of time, and how to save their patients from too strenuous a treatment and sometimes, exhaustion.

## UNNECESSARY TO CORRECT ALL LESIONS AT ONE TIME

We have stated before that it is quite unnecessary to attempt to make all correction of lesions at one time. If we succeed in making one or two specific corrections, that is quite sufficient in the majority of chronic cases. the patient has a cold, or bronchitis, that is quite different, and a little more time must be spent relaxing tissues, sometimes, as well as doing corrective work ; but suppose the case is one of sciatica, or lumbago. Two or three minutes' time is quite sufficient to make necessary corrections, and it is much better to treat the patient each day for a few days, until the trouble is corrected, and the patient relieved. If there is a slipped innominate, also lumbar lesions, a side rotation will secure motion in the lumbar region and with patient face downward, it is quite possible to correct innominate lesions with a single application. A little adjustment of the sacrum which is always necessary and sometimes sufficient without innominate application, will be treatment enough for one time; and if your work is properly done, you will get results; the patient will not be tired; and you will see him the next day with a smile on his face.

The old idea of treating sciatica by leg movement is quite unnecessary. The work may be accomplished by simply working on the sacrum and possibly on the innominates.

We find the greatest thing in Osteopathy is to know when to quit. More patients are sent home tired and exhaused than rested and refreshed. There is some reason for the general statement that has been passed around that Osteopathy is severe. It is not the fault of Osteopathy; it is the fault of the practitioner.

## WHEN TREATING

The next most important thing in Osteopathy is for the doctor to keep his mouth shut while giving treatment. This idea of talking and explaining to a patient, while you are doing corrective work, is all wrong. If your patient starts to ask questions say "Excuse me, but is that vertebra sensitive?" or "Is that symptom you spoke of yesterday still bothering you?" Invariably, as he attempts to talk, give him a rotation, or a quick adjustment that will make him glad to keep quiet. Never discuss politics, religion, current day topics, or even Osteopathy while you are treating. If he asks you regarding a case tell him you will hand him a booklet before he leaves. No matter what question he asks, shut him off as quickly as possible, and assure him that you will attend to it before he leaves the office.

The other day I heard of an Osteopath, and I know it is true, who asked his patient, while treating her, if she had read a certain book. She said, "No, Doctor." He said, "I will give you an outline of it," and if she had not checked him up, he would have gone on with a synopsis of the book while giving her a treatment.

## COURSE IN OFFICE PRACTICE

There should be a course in each of the Colleges on Office Practice, Office Efficiency, and I believe the time will come when a course of this nature will be established, and the practitioners, going out into the field, will be instructed how to handle a patient, and even more important, how to handle themselves. They have possibly never had their attention called to the fact that the majority of patients do not want to be entertained, but want immediate relief, if possible. Take hold of your patient as if you meant business. Make the first move count. Make him feel that you have a keen interest in his cases, that you are ready to correct some lesion; that you intend giving him relief that day if possible. Make each patient feel that he is a star patient; that his case is the very one you want to handle; and mean it when you say it. He knows when you are in earnest; he knows when you are interested; he also knows when your mind is on some other patient, or on some other topic.

It is so easy to treat Osteopathically and get results if you will but put your whole soul into it. When you go to your office in the morning, go a little early, and prepare yourself for the day. Don't wait until the last minute and rush in, and feel that you are not ready for the first case; but be on hand; be ready to meet patients; and be in good trim, so that you will give as good a treatment early in the morning as you do in the afternoon.

Personally, I go through all of the rooms before I treat any patient. We have five treatment tables; we have six electric fans; we have electric heaters; blankets in each room; everything to make patients comfortable during their short stay; but we do not want them to stay and rest after a treatment, as that is quite unnecessary, because we do not exhaust them to that extent. We tell the ladies to go home and not go shopping; lie down at home and rest one hour, and get the good out of their treatment. This works beautifully, and when

we have an occasional case, about once or twice a year, who insists on resting, we arrange so that she will not do it a second time. We had one lady who tried to put it over on us and stayed for about one hour, while I was out to luncheon; and I said, "I guess we will have to charge you for rent of the room, as patients are not supposed to hold a room more than twenty minutes at the most. She did not return and we did not wish her to return. We want to make Osteopathy specific, scientific; we want to give patients the best that we have; we want them to understand that we run the office, and that they are to help us in every way possible to give them the best attention. If we become lax, and allow patients to take up too much of our time, ask too many questions, and linger after treatments for a little rest, we are not doing ourselves justice, nor are we doing our patients justice. Let them know that there are others waiting for the room, as they can see for themselves in the waiting room, and let them know that they must not be selfish; that other are as eager and anxious to have their treatment and become well, as they are. If the general program is laid out, you will find there will be no trouble whatever, and that everything works in perfect harmony.

## NOT EVERY CASE TAKEN

We take a little different stand, possibly, from the majority of Osteopaths. We have stated that should an Osteopath, locating in a new place, take every case that comes to him. he will soon have in the different sections of the city, cases that have not been cured; he will lose ground. After thoroughly examining a case, always wait until the next day to give your report, unless the patient is suffering pain, and then a specific treatment may be given; but in the majority of chronic cases, it is well to keep them waiting, at least one day, in order to make all of the tests and think the case over and decide whether you want to make your reputation on the case. If the case is doubtful, and you do not feel that you thoroughly understand the case there is a possibility of a long drawn-out treatment, also a possibility of not giving satisfaction. I have always taken the stand that it is far better for Osteopathy not to take the case, or at least, let the case stand until you feel that you should accept it. There are many cases that come to us that are so chronic, the tissues so deranged, or the organs functioning in such a manner that the case will never be satisfactory; and we must remember that every case is being watched, and that when we fail on a case we prevent a great number of people from taking treatment, who otherwise would take it if we had not failed on that particular case. Some will not agree with me in this, but it certainly works like a charm.

The first case I examined in Toronto I refused to take. Through it, I secured another member of the family, and to this day I have following, directly and indirectly, through that one case that I refused to take. It was a case that could have been benefited to a certain extent; but it would never have been satisfactory, in my judgment, and I could not have afforded to start in a city by taking cases that would not reflect credit upon Osteopathy. If any of the other practitioners care to take such refused case, very well and good, but I felt that I should not take the case; and all down through the years we have followed this same rule We make every patient feel, and justly so, that we do not care to take a case unless we can give him the benefit that he hopes to receive. We do not want to experiment too much. There is too much experimenting going We do not want to experiment too on all of the time. Tell your patients frankly what you expect to do; never guarantee or promise too much, but simply state that you will take the case, when you give the report on the second day. This acts like magic, and makes the patient feel that when you take his case you are going to give him the best atten-

# AT LAST! IT'S HERE! Do You Know?

- 1. Only new matter is printed every month now in "Osteopathic Health." No articles, once printed, are ever used again in its pages, no matter how good. (Such classic Brochures as are indispensable may be obtained, if at all, only as "Bunting Laity Brochures"). Every issue of "OH" now is made up entirely of clean, new editorial matter.
- 2. This layman's journal will contain in course of the year a lot of sprightly news and topical talks about notable osteopathic affairs such as always interest both patients and public.

(For example in the June issue will be found (1) the Britannica Encyclopedia's New Definition of Osteopathy; the story of Mme. Galli-Curci's two great benefit concerts for osteopathic charities; and the Viscount Deerhurst's story of Osteopathy in Great Britain.)

- 3. From time to time it will contain characteristic Bunting editorials on matters of vital osteopathic concern. Also—
- 4. A wealth of articles especially written for its pages by the best group of thinkers and writers in the profession—every article written on order, every article paid for, and every article having passed muster as fully up to the critical journalistic standards of HSB.
- 5. Many discussions of single diseases. Do you hear it?—many discussions of diseases.
- 6. Many stories of cures.
- 7. Shorter articles and more of them a wider variety of subjects.
- 8. Nothing within the covers of "OH" but Osteopathy, osteopathic interests, Osteopathy triumphant! No side issues — no fads — just Osteopathy which is enough to keep one brilliantly edited magazine full of interest.

It's a regular journalistic service to educate your patients, to instruct and inform your former patients more particularly about Osteopathy, and to make new converts for Osteopathy among the numberless host as yet not interested.

You can use this *new* "OH" with pleasure and profit in conducting *your* practice—

## But Do You?

Let us make a survey of your field and its publicity possibilities. Expert knowledge and advice without obligation or cost to you. We've been bringing home the bacon for Osteopaths for twenty years, and we can bring it home for you! Write us this day.

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Waukegan, Illinois

tion, and that you really feel in your own mind that you are going to help him. You will find that you have very few cases that will not respond, at least to the extent that you have presented to the patient.

Osteopathy has not made the headway that it should have made. It is the fault of the practitioners. We have not done our best, nor used our best judgment, in all instances. We have not always concentrated and given our patient the best attention. We have not always kept ourselves in the best physical condition. We have not always taken sufficient interest in the case to remember details and treat them in a manner that will follow up the previous day's work.

## PATIENTS LIKE SHORT SPECIFIC TREATMENTS

We find that, in the majority of cases, patients are not treated often enough; that a quick, short specific treatment is what the patient likes, and he likes to come every day for the first few days, and then four times a week, and then three times a week; and we can secure the best results when we do specific work, and when we follow up each day's work by additional corrective work. The Old Doctor had the right idea. His motto should be emblazoned on our memories, so that constantly our minds would dwell upon "Find it, fix it, and leave it alone." Seldom did the Old Doctor demonstrate technic. His idea was to so instil into the students the idea of applied anatomy and of making careful examinations that the treatment would suggest itself in each instance. However, there are a certain number of troubles which can be treated in a more or less stereotype way; but, as a rule, it is much better to use your own technic after making your findings in each specific case.

## OFFICE WORK ONLY

We have always contended that in a large city an Osteopath who has been practicing for some time should do office work only; that is, if he has a sufficiently large practice, say, after ten year's time. By doing so, you refer your outside cases to the young Osteopaths who are just starting practice, and usually they are very keen and alert, and handle these cases very nicely. Let your patients know and feel that you have confidence in these new doctors who assist you and tell them while you are treating them that if they ever need treatment at their homes, in acute cases, that you will send some doctor to give them relief until they can return to the office. We have started a number of Osteopaths off; in fact, we are constantly referring cases to the newer members. and we find no difficulty in holding the cases and in having them return to us at a later date. It seems almost selfish for an old practitioner to go out and take every case that calls him, and treat every acute ailment that his old patients have, when he might be saving his strength and energy, and doing a kindness to the young doctors who are struggling so hard to establish a practice.

## REGULAR TREATMENTS FOR OSTEOPATHS

All over the country we hear constantly of D.O.'s who are failing in health, who are laid up with colds and grippe and in bed for days at a time; in fact, I know of two, the last month, who were in bed two or three weeks. This seems almost ridiculous, in a way, and I will tell you why it happens. There is such a great lack of system among the Osteopaths; they do not take regular treatments; they allow themselves to go along three or four weeks, or even months, without having themselves adjusted. For years I have taken two treatments each week, Monday and Friday, at five o'clock, and as sure as the day comes around, unless I am out of the city, I have my treatment. This is one secret of health. I have been sick in bed one day in twelve years, and I believe it pays to take our own treatment. Our work, at the best, is a little strenuous, and the muscles tighten and sometimes produce lesions

while giving treatments, sometimes costal lesions, but by having regular treatments, we keep ourselves in the best of trim. Have an understanding with one of your fellow practitioners that you will inter-change treatments twice a week, and see that nothing interferes with your own treatment. Now, in order to be a successful Osteopath, we must have health; in order to have health, we must have system; we must have our sleep; and sufficient outdoor exercise to keep us in the best of trim. Sleep outdoors, eat regularly, and by the way, never miss a meal—eat something, unless you are sick in bed, and there is no excuse for that. We eat luncheon at eleven-thirty, and I have been eating at the same place for fourteen years. Unless I am out of the city, I do not miss being at the table within a range of ten minutes time more than once or twice in a There is nothing like system. Suppose vear. you have a patient or two who come in just as you want to go to luncheon. Tell them you will be back in about one-half hour and they will either wait or come back, because in the first place they know that they did not have an appointment at that particular time.

## GET OUT OF THE WHIRLPOOL

Save yourself; keep yourself in good trim; be master of the situation. Read all those good books by Marden, by the various men who write inspirational books—Frank Crane; Haanel, author of The Master Key; Haddock, Power of the Will, and Power of Success. Keep yourself stimulated, inspired; spend a little time each day all by yourself; get out of the whirlpool; sit on the bank, and imagine you see yourself going around; this will soon break you of the habit of living in a whirlpool. Keep yourself full of vigor. I like the word "vigor" better than "pep." Get up in the morning ready for work. Go to your office with the determination to do your work and leave the office feeling as if you were not fagged out. If you spend more than ten minutes in a treatment room, you lose energy and become tired; that is, if you are treating case after case. Drink lots of water. I usually take a drink

between each patient, and I never drink anything harder than water either.

## SPIRIT OF THE OLD DOCTOR

It is the spirit of the Old Doctor that should dwell in our minds, and when we think of the great things that he accomplished years ago when everything was new, it simply fires us up, and urges us on, to accomplish many things that we would not otherwise accomplish.

When I see Osteopaths who have been practicing for twenty years and have no larger practice, or as large a practice, as they had ten years previous, and have no typewriter, no system; just simply going along year after year and still giving half and three-quarter hour treatments; it does seem as if they had lost touch with the Old Doctor and had forgotten his teachings and sayings.

Get out of the rut! Make your treatments more specific. Get them down to a fine point, and make your patients realize that you are improving year by year. That is the way to progress; that is the way to make Osteopathy so great that we will not be frightened all the time by those who are engaged in a practice that is an imitation of our own.

# Spinal Adjustment—A Discussion

George Malcolm McCole, D.O., and John V. McManis, D.O.

## VI—Tone

In preparing these articles on the spinal lesion, it will be noted that they are not all our own ideas but that we are trying to bring together good ideas on the subject wherever they are found. So far as we know, no attempt has ever been made to make any comprehensive study of the spine in all its phases.

Sometime ago in reading an article by Denton N. Higbee, M.D., D.O., D.C., we ran across the following statement: "It seems to have been pretty generally overlooked by physiologists and diagnosticians that there is an almost constant relationship between the tone of the deep transverse muscles of the spine and muscles of the viscera that receive their innervation from that region of the spine,—," and again he says, "—That there is also a relationship of the caliber of the muscles of the deep spinal muscles, (especially longitudinal), and the related organs."

This quotation set us wondering just what physiologists had to say about this so we wrote to Verne E. LeRoy, Professor of Physiology at the American School of Osteopathy, asking his opinion on the subject. Professor LeRoy is one of the foremost teachers of physiology in the United States as well as a thinker along Osteopathic lines as his answer shows. It follows:

"There are, Doctor McCole, several reasons why it would be difficult to give a complete answer to your questions.

"In the first place, the statement you wrote is worded ambiguously.

"I think the first part of that quotation doubtless means—— 'It seems to have been pretty, generally overlooked by physiologists and diagnosticians that there is an almost constant relationship between the tone of the deep transverse muscles of the back and the tone of visceral muscles when both are innervated from the same spinal segments,—\_'

"If that is the meaning, we shall have to determine whether the writer means in health

or disease. No doubt he means both. But the idea comes that what a living thing does in disease is far away, possibly, from what it does in health. So if the relationship exists it must be very wide and loose.

"Muscle tone, by the way, is a matter that is not understood beyond some of its characteristics and its neurogenic origin. No satisfactory explanation has been made of the difference between *muscle contraction* and *muscle tonus*. Of course *tonus is a reflex phenomenon*, and the afferent nerve impulses concerned doubtless come from the muscles themselves, related tendons and joints, skin surfaces, higher centers (emotions, etc.) as well as viscera. How all this would work out in health would have to be determined, I dare say, by the study of some one muscle in some one man under many conditions of environment.

"In disease, however, there seems to be according to the Osteopath a relationship between visceral conditions and skeletal muscle 'Texture.' ...The 'Texture' that the Osteopath feels may be muscle tonus exaggerated and again it may be muscle cells filled with fluid until they are tight and hard. Which it is I do not know nor do I know anybody who does know.

"Here again is *something Osteopathic*. An M.D. has no use for it (yet) and all physiology texts are made by Medics. So it is no wonder the books are weak on these subjects. "That a reflex 'condition' in a muscle may

"That a reflex 'condition' in a muscle may be caused by diseased viscera has been known for a long time to physiologists but why should they use up space in their books telling about such stuff when they don't have any use for it. The texts are written to sell to Medical students—and there you are. There are a thousand and one things in a human body that need investigation just as much as does muscle tone, contracture or caliber and most of the investigators are working under the direction of medicine men—so the points the medical man is interested in get the first attention.

"For my own mind, I take it that 'contractured muscle' and 'caliber of fasciculi' and it may be a few other terms all mean the same thing. It would not surprise me to learn that this 'thing' is not muscle tone or even an exaggerated muscle tone but *something beyond that* -something that replaced muscle tone in part at least after the muscle cell had been subject to abnormal stimuli for a long time.

"In other words, it is the very beginning of a pathologic state in the muscle. This is necessarily vague because I admit I do not know what I am talking about. However, a nerve impulse will alter the permeability of a cell wall to certain substances in the body fluid (lymph). We see that action in glands. If such action obtains in muscle cells—it does not take much imagination to make an abnormal nerve impulse (such as make for tonus, whatever it is) bring about an accumulation of intracellular liquid and thus increase the caliber of the fasciculi in muscles.

"You see by what I have said that I cannot The metabolism of muscle tone is so slight that it cannot be measured. But when the nerve is cut the tone is lost—so there must be meta-bolism and consequently a production of small molecules out of the large molecules within the muscle cell. The small molecules serve to in-crease osmosis through the cell wall—water going into the cell. In health such goes on more in day time and less at night when tone In a 'contractured muscle' such is lowered. goes on the same both day and night, I guess. Does It? I don't know how a muscle lesion feels at night when the owner is asleep as compared with the condition in the day time. If earning this Osteopathy stuff but already I have spotted a number of things that I am going to find out myself later on.

"If I have not answered any of your questions to your satisfaction, it is because I can't. If you have any real easy questions—shoot 'em. I'm good on easy stuff. However, if I were you I would not let an unanswered question spoil a good article. I shall be looking for 'The Spinal Lesion' and read it when it's out."

This opens up a discussion of some extremely important and interesting points, and the authors of these articles would consider it a great favor if anyone in the profession will supply us with any information on the above subject of "Muscle Tone." In fact we would appreciate hearing from anyone in the profession on any of the points which we have been discussing in these articles.

It is our sole desire to bring before the profession valuable information along these lines and the farther we go into the subject the bigger it looks to us and the more we wish to learn about it.

Doctor McConnell is constantly urging the profession to give its very best effort to the study of the BASIC IDEAS of our profession and we believe Doctor McConnell is right in his stand.

Osteopathy stands for SPINAL ADJUST-MENT and the PROMOTION OF IMMUNITY. Drop those and there will be no Osteopathy and no Osteopathic Profession.

[To Be Continued]

## Stop Boosting the Chiros

Every time anyone knocks me I credit myself up with a little free advertising.—*Clarence B. Utterback, D.O., Tacoma, Washington.* 

# Osteopathy and the Abrams Electronic Concept

Francis A. Cave, D.O., Boston, Mass.

The essence of my last contribution regarding the Abrams concept, in the April OP, covered the proposition that a normal organ or tissue throws off energy at a definite measureable rate and that when such organ or tissue becomes diseased its rate of energy naturally changes, and the change itself can be measured mathematically by the same methods as used with the normal tissues.

Accepting this proposition as a demonstrable fact, it would naturally follow that an organ or tissue which was functioning improperly—because of interference with its nerve or blood supply, caused by an osteopathic lesion—would have a different vibratory rate after the lesion was corrected and normal conditions re-established. It is now possible, through the Abrams methods of electronic measurement, to ascertain mathematically the efficiency of the osteopathic procedure of adjustment; and not only the efficiency of Osteopathy, but also the efficiency of every other therapeutic method or system must some day be measured by the electronic yardstick. For the first time in medical history, we have now a definite method of measuring the potency of every therapeutic system under the sun. And as soon as the public opinion becomes awakened to the possibilities, it will demand that therapeutic claims and theories be tested out by this electronic yardstick and then abide by the decision, favorable or otherwise.

A new and fundamental factor has now been injected into medical thought and one which is to mold very largely all future medical history. Abrams has merely utilized in diagnosis and treatment of human ailments the same electronic forces which are harnessed and utilized in the radio-phone, the wireless telegraph, and other similar revolutionary developments in the economic world. And it is exactly as sensible to deny the radio-phone and the wireless telegraph simply because we do not understand the mechanism of their operation as it is to deny the Abrams electronic methods as applied to the body, simply because we cannot just understand the philosophy and methods of procedure.

Upton Sinclair, in one of his articles on the Abrams concept, has said in substance that while Abrams' theories may be entirely wrong, his facts are right. And this was exactly the situation which obtained when Osteopathy was born. The clinical results were far in advance of laboratory findings and even theoretical formulas.

The apparatus required for diagnosis by the Abrams electronic method is simple and consists essentially of three things—a dynamizer, for receiving energy thrown off from blood or tissue specimens; a special rheostat, for measuring this energy; and a normal human nervous system, through which the energy may be conveyed and in which certain definite and easily demonstrable reactions are produced under proper conditions. And these reactions are always the same. Every piece of cancer tissue or drop of blood from a cancerous patient will give exactly the same reaction. And this statement applies to all the infections and malignancies. It is not as yet possible, however, to eliminate the human equation, and occasional errors must inevitably occur. But I think I can say without any hesitancy whatever that the system of the Electronic Reactions of Abrams is by far the most accurate method known to Science today for diagnosing diseased conditions in the human body, and a theoretical 100 percent of accuracy may at least be conceived.

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Dr. C. C. Reid 501 Interstate Trust Building Denver, Colorado When the vibratory rate of any diseased condition is established and the mathematical formula has been made out, the extension of this same philosophy requires the application of destructive vibratory rates which will sterilize the infection or draw the fangs of malignant conditions. Such things can be demonstrated in the laboratory experimentally, but the best of all proof is the fact that patients with such conditions, and having treatment according to the philosophy of Abrams, are getting well by the hundreds and recovering from conditions otherwise hopeless and involving terrible suffering.

Here, in truth, is a case where "the proof of the pudding is in the eating." And while any physician of any school might make the electronic diagnosis and apply the electronic treatment to sterilize—some focal infection, for instance, I maintain that immunity would not be established in such infected tissues without the correction of the osteopathic lesions affecting their nerve and blood supply. Furthermore, every patient undergoing treatment by the electronic methods of Abrams is given concussion at various levels of the spinal column —a procedure which furnishes a natural link between the philosophies of A. T. Still and of Albert Abrams. Osteopathic physicians will easily excel in the application of these methods and will find a new world of service to humanity awaiting them with the gates wide open. Not every member of the osteopathic profession will take up this work in full; but the day will come when the osteopathic physician who has not equipped himself to utilize these methods at least in part will find himself on the shelf with the cobwebs.

## Therapeutic Light as an Adjunct

I use a 1,000 watt, 500 candle power light in the office and take a 200 watt light with me on outside calls. You will be surprised to find how the soreness goes from the part of the body that you apply the light to and there is no skin so sensitive that you cannot use it. I like it very much with children with colds or throat trouble as I can use it when they won't allow me to treat them.—*E. R. Wilson, D.O., Chariton, Iowa.* 

## Dr. Abrams Accepts Place on AOA Program, Los Angeles!

In response to invitation from President Scothorn by wire Dr. Albert Abrams of San Francisco has definitely accepted a place on the AOA program of the National Convention at Los Angeles. He will talk about his investigations in ERA. Not only will Dr. Abrams appear on the program but he has given Osteopaths full recognition as physicians to take his work and use his oscilloclast. Dr. Scothorn says great credit should be given to Dr. J. V. McManis for his untiring efforts to persuade Dr. Abrams to put Osteopaths on full parity with physicians to take and other schools in studying and practising Abrams' system of radio-active diagnosis and therapy.

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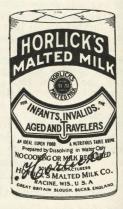
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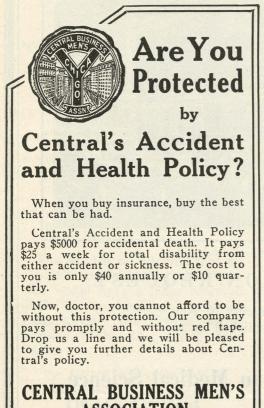
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# Dr. Abrams' Electrifying Diagnosis and Treatment

B. P. Mansfiel d, D.O., DeKalb, Ill.\*

Has the therapeutic millennium arrived? One might be prompted to think that something approaching this ideal state is now at hand to read the enthusiastic accounts of Dr. Albert Abrams' Electronic Diagnosis and Treatment as reported in the last few numbers of The *OP*.

It goes without saying that this new and breath-taking method of diagnosing and treating disease will be a godsend to suffering humanity —judging from the reports in The OP. But consider also what an unalloyed blessing it will be to us who earn our living by ministering to the ills of the suffering public. The two greatest problems which confront any osteopathic practitioner, no matter how experienced or inexperienced, will be solved. The same two causes of the most frequent mistakes in practice: diagnosis and treatment, will be obviated. No longer will we have to puzzle over whether our patient's torticollis is due to an infected sphenoidal sinus or to the little one who "rolls her own" whom he passed on Main Street while going to lunch. Will we question whether the condition we are studying is caused by a fugitive spirocyte paddling in the Canal of Schlemm or by a hard boiled gang of gonococci lurking behind the portieres of the broad ligament? Not at all. We simply get a drop of blood on a piece of filter paper and place it in the ohmmeter, turn the switch, percuss the abdo-men, and Presto—we know what the pathology is and, marvelous to relate, also where it is. Honest, even without seeing the patient. If we have not an ohmmeter we can send the blood to Dr. Abrams and the diagnosis is made by mail, so to speak, something which even the chiropractors do not claim to do. And the treat-ment? Simple. Just turn the switch on the Oscilloclast to the ohmage indicated for that disease and shake the everlastin' daylights out of the disease.

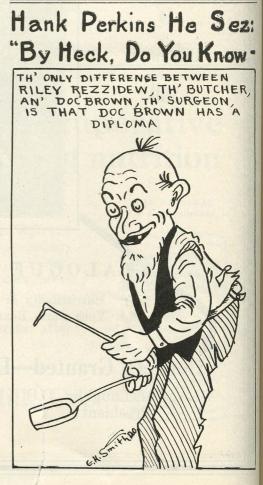
Stop momentarily in your toil, brother practitioners, and consider what unheard of opportunities for ease and leisure this new method opens up to us. With an ohmage chart on the wall and a well trained office girl what is there to prevent us from indulging our avocations to our hearts' desire? And with a fool-proof "diagnostic machine" a reality, we could go still further and spend our winters in balmy Florida or in the land of golden sunshine beyond the Stormes, with diagnostic curtain and a cure With diagnosis certain and a cure Sierras. practically positive in the majority of diseases would we have to worry that patients would not struggle to crowd into our offices? Try it and see. We should take immediate advantage of our opportunity to impress these facts upon prospective students of Osteopathy. When they learn what can be accomplished with this rev-olutionary method, for the patient, to be sure, but for themselves primarily, there will be created such a yearning for osteopathic training that the schools will be swamped with applicants. Try the Ponzi method. Show the prospects how easy it will be to make money after they enter practice and our present essay contests and others student recruiting methods will be automatically rendered archaic.

If we seriously consider the money making possibilities presented to us by the genius of Dr. Abrams the prospect almost overwhelms us.

\*The truth of Dr. Abrams' theories have yet to be demonstrated to a skeptical world. Let us hope that ultimate results will justify present expectations. Even in that event, however, Dr. Mansfield's dream of easy practice is doomed to disappointment. It is sad but true that the successful use of the Abrams' instruments requires knowledge, trained skill and infinite pains. If percussion is to be used, it is well to remember—as pointed out by Dr. Mather Thomson—that it is a difficult art, comparatively few men being capable of attaining high proficiency in it. Brains and efficiency will still remain at a premium in practice, notwitstanding all there may be found available to aid the Osteopathic Physician in the Abrams methods. With a battery of ohmeters and oscilloclasts and a corps of trained assistants we could make even Dr. Millard's eighty-six thrusts a day seem like child's work. And at the rate of three or four dollars an oscillate—Hot dog! Who wouldn't give up his or her practice for a month to learn such a business? And probably the pickin's for those who give these courses might not be so very bad, either.

The profession certainly owes Dr. McManis a tremendous debt of gratitude for his sacrifice and untiring efforts in correcting the defect in Dr. Abrams' vision. It was another triumph for Osteopathy and was accomplished without the use of glasses or displacing the eyeball. Perhaps it is not generally known that Dr. Abrams suffered from a peculiar form of colorblindness. When Dr. McManis first became interested in the electronic method for Osteopaths Dr. Abrams was unable to distinguish the color of the long green when held by an Osteopath. However, after several weeks of Dr. McManis' gradual but skillful adjustments he was unable to tell any difference in its hue whether in the hands of an Osteopath or medical man. Who can tell but what the same treatment was responsible for the good doctor's apparently "recent conviction" that there may be a glimmer of scientific truth in Osteopathy, and that all Osteopaths are not necessarily uneducated cuckoos?

There is no doubt that the sciences of chemistry and physics have made greater advances in the past ten years than ever before and there may be something, or a great deal, in Dr. Abrams' Electronic Diagnosis and Treatment. If it is as good as proclaimed it will not take long for his name and method to be known wherever there is sickness. If he really has disease by the tail we will all know it without



AOA Convention, Los Angeles, Week of July 3rd

doubt in a very few years. Let us not forget, however, that ever since the days of Aesculapius new discoveries have been bursting like a star shell periodically over the field of medicine, have burned brilliantly for a short time, and then have dropped into oblivion. If he really has something which will do the things claimed for it he can afford to smile at the

> If you were intrigued by Dr. McManis' story in the January issue about

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And wish to be further informed we shall be pleased to enter your order for the following publications:

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quips and shafts directed toward him and his enthusiastic osteopathic press agents. Let us hope so. In the meantime, while waiting the test of time, we are still from the same state as Andrew Taylor Still.

## Dr. Beckler Relates His Experiences with ERA

Since so much interest is being stirred up about the Electronic Reactions of Abrams lately it may be of interest to relate my experience. In the fall and winter of 1920-21 I had four cases of cancer as I diagnosed them. I had one diagnosed by microscope at one of our well known hospitals with a report that it was not cancer but was in a state that would warrant operation. The ERA report was carcinoma of uterus. I treated with diathermia, eosin and fruit and vegetable diet with an apparent cure resulting, tho patient had suffered a paralytic attack previously. The second case of suspicioned cancer of uterus gave an ERA reaction for carcinoma of uterus with a strain at the left breast. I had not examined the breasts but on receipt of report did examine and found a rather hard lump of very perceptible size there. This woman is symptomatically cured. The third case had undergone an amputation of the right breast in January 1919 with the micro-scope findings of carcinoma. Eight months later the left breast began to enlarge and when I sent in specimen for ERA diagnosis the nipple was very greatly retracted—inverted. January 1st, 1921, the patient suffered a spontaneous fracture of the right femur which x-ray re-vealed as carcinoma of the bone. Three specimens of blood were examined just after this fracture and none revealed carcinoma by ERA. The patient has since had a very serious time indeed. At one time the liver was apparently three times as large as normal and the jaundice was the worst I ever saw to recover. There were nodules all over her body. For the last several months her complexion has been nearly normal, the liver about normal in size and the nodules have disappeared. The x-ray some four months ago showed an apparent thinning of various areas of the right innominate but the patient has no pain and feels well. If any ERA enthusiasts want specimens of blood for further examination I think they can get them. I was arranging to learn the methods of Abrams last year but the seriousness of this patient and others with no other osteopathic practitioner near has prevented it; also the apparent contradictory reports on this case dampened my ardor. This is not a knock but a report.—H. S. Beckler, D.O., Staunton, Va.

## Taking ERA at Bradford, Pa.

I am at present in Bradford, Pa., taking the Electronic Reactions of Abrams under Dr. J. W. King and am fully convinced of its great worth in diagnosis and treatment. The methods are revolutionary and to one not fully grounded in them, inconceivable, but nevertheless almost infallible, afterward.—R. L. Starkweather, D.O., Goshen, Ind.

"The Electronic Reactions of Abrams unquestionably constitute the most amazing and revolutionary concept in the entire history of medicine—Osteopathic Physicians should be among the first to utilize them."—Dr. Francis A. Cave of Boston.

The June Issue of

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## ERA in Every Case Sustained or Augmented Clinical and Laboratory Findings

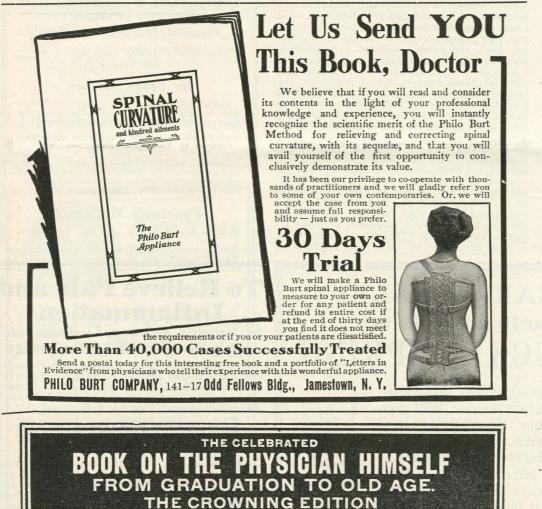
For a number of years we have been acquainted with the work of Dr. Albert Abrams of San Francisco. Eighteen months ago a dear friend and colleague, William Wolfram, M.D., of Cincinnati, instituted a practical test of Dr. Abrams' methods. For over a year he sent speciments of blood, with very little or no data, and found in every case that his clinical diagnosis was confirmed, and often unsuspected pathology was diagnosed which on further investigation by the ordinary methods proved to be correct. We were informed of the projourneyed to 'Frisco and took Abrams' course, Wolfram then and on his return we immediately negotiated for the installation of the ERA into our department of diagnosis. We have incorporated this method in our examination, the tests being made independently of routine diagnostic procedure. The reactions have in every case sus-tained or augmented our clinical and labora-The element of psychology or tory findings. chance we have eliminated by repeated examinations of the same blood specimen, with consistent results, in over 500 tests. A study of

the later works of Abrams will show them to be entirely in accord with the basic principles of Osteopathy. of Osteopathy. Most certainly Abrams has opened the way to a true science of diagnosis and treatment which should be heralded and acclaimed by the osteopathic world. This letter is prompted by an unwarranted criticism which I found in your last issue of OP. I find no record of the critic having studied under Dr. Abrams, or having been associated with a known practitioner of the ERA. It is distressing to find so unscientific and puerile-like a condemnation offered by a man of the standing and professional reputation of Dr. It is my personal opinion that Dr. J. V. McManis is to be highly commended for his efforts to make this new field available to the Osteopaths. May I extend a cordial invitation to any of the profession who desire to investigate the reactions of Abrams to visit our laboratory and apply whatever tests they deem necessary to satisfy themselves as to the value of this new science. -Victor H. Lindlahr, D.O., Chief of Staff (C.C. O. '18) Lindlahr Nature Cure Institutes, Chicago, Illinois.

## We Did, Doctor, Right Along

I hope you will give us, from time to time, some of the "Dr. Abrams Dope." I have been

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studying his methods for some years. For some afflictions it is the wonderful remedy.— J. B. Baldy, D.O., Tacoma, Wash.

## Spondylotherapy Not Imitation Osteopathy

Hurrah for the Osteopathic Profession! Hurrah for Abrams! I am gratified to see that the two are coming together again. I had the pleasure and the profit of taking the course with Dr. Abrams some ten years ago, before Osteopaths were barred from his courses Since that time I have written more or less of Abrams and his work for the Osteopathic Physician but it was a rather cold reception it got from the profession. I was convinced at that time that Abrams is scientific and I have had no reason to change my mind. Though I have not yet followed him all the way in his recent developments, I have been using some of his methods and I found them good. I found then, and I still find that there is a disposition among Osteopaths to slur his methods, especially spondylotherapy, as a cheap imitation of Osteopathy. Please allow me to repeat and to emphasize that such is not the case. His reflex Please allow me to repeat and to diagnosis and his reflex therapy were developed by him individually, and they are different than anything we had gotten through osteopathic channels. To be sure, these are right in line with Osteopathy and should have been incorporated in osteopathic teaching as soon as they were proven. They were in classes that I taught. We trust now that there are enough voices being raised to make them be given due recognition. "Prove all things, hold fast that which is good."—Arthur Still Craig, D.O., Kansas City, Mo.

The Case of Captain F. B. Fishburne After reading in The OP the article by Dr. McManis I am sending you a case of a friend that has had such wonderful results from taking the Abrams treatments. I was quite interested in that article and so glad you published it. I am an Osteopath first, last and always, but if we can add to what we already have, why I say get all we can and then do all we can for suffering humanity. This case of Capt. F. B. Fishburne is very interesting and I am sure you would like to have it. I have known him for a good while. He is a conductor on a passenger train coming through our town every few days. He gave me this and I am going to copy it just as he gave it to me. If you should care to publish this it is all right with him for he is so enthusiastic over the good he has received he wants to do all he can to help others-Joanna Barnes, D.O., Ridge Spring, S. C.

Captain F. B. Fishburne's Case: During the summer of 1917 had sore place on tongue. Went to many doctors here and in Baltimore. General opinion was 'twas luetic condition although Wasserman always negative. Had many doses of 606 in veins followed by a slight improvement after some of injections. Finally de veloped small double tumor on left side of tongue near front. Went to Dr. Schaumbuy, N. Y. and had tumors removed. Had radium immediately thereafter and was told that when it was used in cancer cases in this early stage "we get 100% cures." This was at the Radium Institute, 70th Street, West. Later had quite a number of applications from doctors on Madison Avenue. The operation was performed August 30th, 1918. Early in 1919 had enlarged glands on right side of neck and had another operation for removal. In August 1920 noticed small tumor under surface midway back. Consulted Dr. Burnam at Kelly's in Baltimore and was told no cause for alarm. Between then and January saw same man twice with same results. However, other M.D.'s at Kelly's including Dr. Kelly himself was of opinion should operate and Dr. Burnam so decided

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- Directress of Nurses Training School
- DR. JOHN HALLADAY
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- DR. E. C. CHAPDELAIN, Interne DR. LEON PAGE, Interne
- DR. M. B. BAILEY, Interne
- DR. G. Y. WARNER, Interne DR. W. J. HUGHES, Interne

Dr. W. J. HUGHES, Interne Our hospital has enjoyed a very prosper-ous, satisfactory second year, with about 40 percent increase of patronage over the previous year. Dr. Hardy has proven to be very capable in the Ear, Nose, Throat and Eye Department. His work is high class and conservative. No effort is made to do things in a spectacular way. Dr. Earl Laughlin and Dr. Bigsby have both proved very valuable in their departments also. also

For further information address Dr. George M. Laughlin, Kirksville, Mo.

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One hundred and twenty-five upper classmen of the American School of Osteopathy have taken our course in "McManis Table Technique" during the past two months. They like our tables! Why? Because the technique is easier and joint motion normalized guicker.

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in January. January 20, 1921, glands removed on left side although no enlargement. February 9, 1921, one-third of tongue removed and instructions given to go for Radium to clear up any remaining germs. About March 24th was told by Dr. Burnam only thing to do was use Radium needles or Radium Emination. April 1st saw Dr. Boggs of Pittsburgh. He said could sign same letter written by Dr. Burnam and would go further and say it had now attacked his tongue. The slight pain he then had could have been caused by the tongue operation but there seemed abundant evidence there was a radical recurrence when the standing of the doctors who made the examination is considered.

He then hurried out to Dr. H. T. Irvine, Austin, Texas, the nearest place he knew of where he could get the Abrams' treatment. Was there six weeks, leaving for home on May 18th. When he reached Austin he weighed 140 pounds. Left weighing 148, now weighs 170. Good appetite, sleeps well, no pain at all. No evidence of return of trouble. Ohmage of cancer was 18. Remember Wasserman had always been negative. 18 ohms was so high that Dr. Abrams wrote Dr. Irvine he was afraid that he could not handle the case. However, had already been given three treatments and at end of week a three point reduction had occurred.

Abrams' Work Fits in with Osteopathy Through the article in *OP* written by Dr. McManis I became enthused over the Electronic

Reactions of Abrams; had a diagnosis of myself and am pleased with the results. Have booked up for the course this summer with Dr. King of Bradford, being only 20 miles from here. He is a real fellow and has shown me every courtesy possible and is very capable in the work. I am very sure Abrams' work will fit right in with Osteopathy.—J. H. Henderson, D.O., Olean, N. Y.

## Dr. Cave Demonstrates ERA to Editor "Pearson's Magazine"

Well, the great work has been accomplished and the osteopathic profession is now accorded the same rights and privileges as M.D.'s in the matter of leasing Oscilloclasts and the Electronic Reactions of Abrams. Much credit accrues in all fairness to The OP for the very splendid assistance given to this movement in the way of publicity to the profession. The large amount of space given in your columns has been loyally and cheerfully given for the benefit of the entire profession and your reward will come in due time. Please accept my most grateful appreciation for your splendid campaign.

My demonstration in the ERA to the editor of Pearson's Magazine during the month of April was a complete success and I was greatly pleased to witness the *editor himself* making the most accurate diagnoses under my guidance, which merely proves that the Abrams concept is basically so simple that even a layman can comprehend and develope it. As a result of this demonstration, "Pearson's Magazine" will give much space in the June issue to an article on the ERA by Upton Sinclair, to be followed by similar articles later on. Pearson's for June should be given the widest possible circulation, for the benefit of public and profession alike.

Under date of April 19th, Dr. Abrams wrote me:—"I am glad your demonstration was a success. I have finally decided to lease oscilloclasts to those who have taken the course and for whose ethical standing you will vouch." This letter was confirmed by wire to President Scothorn during the Atlantic City Convention of the Eastern Osteopathic Association, and the announcement made from the platform. It is just splendid news also that Dr. Abrams has accepted a place on the Los Angeles program of the AOA and I predict a capacity audience when his turn on the program comes to time. The way is now open for Osteopathic Physicians to restore health and happiness to thousands of cases of malignant and infectious dieases without the intervention of surgery, and to make themselves more than ever before a supreme necessity in their respective communties.—Francis A. Cavea M.D., D.O., Boston, Mass.

## Seek Truth with Open Mind

Inclosed find check for \$2.00 for which please enter my subscription to the Clinical Quarterly of Abrams. I have been very much interested in the discussion of the Electronic Methods of Diagnosis and Treatment. You deserve great credit for helping to bring these methods before our Profession. Should they prove to be one half what they claim for them, it would offer a great advance in therapeutic methods, and would dovetail into our practice nicely.—Frack H. Smith, D.O., Indianapolis, Ind.

## Bunting Plant an Inspiration Says President Scothorn

On May 11th I had the great pleasure of a trip through The Bunting Publications plant at Waukegan. I can say that it is a real inspiration to see that modern structure in its attractive environment and then to go through it and observe the up-to-date equipment in both office and printing departments and the system and efficiency which everything is done. The entire plant enjoys wonderful daylight; there is lots of working space for everyone, and all employees seem cheerful and contented. A visitor is made entirely at home and most welcome. Any Osteopath who in his travels finds himself in Chicago should not fail to go out to Waukegan and give the Bunting Plant the "once over." The profession can be proud of the Bunting institution.—S. L. Scothorn, D.O., President, AOA, Dallas, Texas.

## Case Report DROPPED STOMACH

Man of 38 with a dropped stomach, mucous gastritis, chronic appendicitis, vomiting at meals, *was cured in four months* by Osteopathy and the Gravitiser.

X-Ray showed gastroptosis and an elongated and misplaced appendix, affixed to the fourth lumbar vertebra.

His indigestions were controlled by the sixth day, vomiting reduced to only an occasional recurrence and all abdominal pain relieved by the twelfth day.

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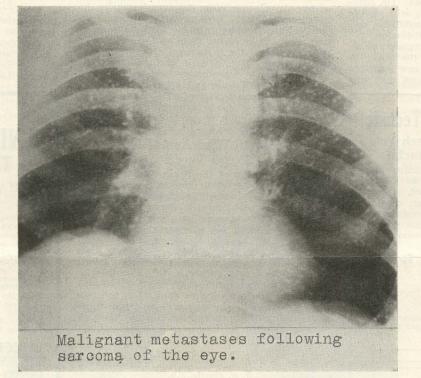
The Gravitiser is widely known and recommended by leading New York physicians and applies in all cases, irrespective of high or low blood pressure or cerebral plethora, up to the incapacity of the patient.

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GEORGE A. STILL, A.S.O. Hospital, Kirksville, Mo.

## AOA Signs Lease for Chicago Office -Will Occupy in June

The AOA has signed a lease for business and editorial quarters in the Studebaker Building, Chicago, on Wabash Avenue, right behind the Blackstone Hotel, and will occupy the premises about June 15th.

Dr. S. L. Scothorn, president of the AOA, made a trip to Chicago the second week in May for the purpose of selecting offices for the AOA and, after careful investigation, found desir able space available in the Studebaker Building; he decided the location was well situated for AOA purposes; and concluded a very favorable lease, effective June 1st. The offices cover 1,200 feet of space on the 6th floor. They are well supplied with daylight, there being two extremely large south front windows. Dr. Scothorn feels that the new premises will enable the AOA to take on greater responsibilities and do more efficient work for the profession. Mr. R. H. McClure, Business Manager, is al-

ready making arrangements for the move to Chicago. He expects to be in the new quarters by June 15th. He told Dr. Scothorn that new

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## contracts, now made for AOA printing in Chi-

cago will save the association a lot of money. Dr. Scothorn is to be congratulated on having at last made consolidation of AOA business

and editorial offices in Chicago an actuality. It should lead to better functioning of all the departments of AOA activity.

## Dr. W. F. Wurth of Kenton, Ohio Furnishes the Winning Evidence for Arbuckle

The above was the headline of generous type in the Kenton, Ohio, Daily Democrat, April 13. If Arbuckle is free today he has Osteopathy to thank for it, it seems. Thrice was he tried on a charge of manslaughter. Twice the jury disagreed. The third time he was acquitted within six minutes after the jury began its de-liberation. Why? Because his attorney, Garvin McNab, put the valuable information and suggestions he received from an Osteopath, Dr. W. F. Wurth of the little town of Kenton, Ohio, to good use. Dr. Wurth claimed that the Virginia Rappe case was entirely similar to a case he had in Kenton and Arbuckle's Attorney using the information supplied as a foundation, built up a strong case in Arbuckle's favor which resulted in a verdict of not guilty.

## Osteopath Wins Appeal from \$5,000 Verdict

Justice Schaffer of the State Supreme Court ordered a new trial in the suit against Dr. Dudley B. Turner of Philadelphia, Osteopathic Physician, by one James S. Stemons, who was awarded \$5,000 damages by a jury in common pleas court No. 2 for a severe burn received from an X-ray machine. Justice Schaffer ruled that not a "high degree" of care but only such a "reasonable skill and diligence" is required of physicians and surgeons as is ordinarily exercised in their profession; that "there was nothing in the evidence to show that the machine used was in any way different from those ordinarily used or that the defendant through lack of training or otherwise was incompetent to handle it."

We have made medical practice still more perfect by our advancement—H. H. Fryette, D.O.

# The Chicago College of Osteopathy 5200-5250 Ellis Avenue, Chicago

The Summer Quarter begins June 19, 1922 The Autumn Quarter begins September 23, 1922 The Winter Quarter begins January 2, 1923 The Spring Quarter begins March 23, 1923 Each quarter is twelve weeks in length.

Students are admitted at the opening of any quarter, but no student is admitted after the first week of a quarter.

The special Post Graduate course will begin Monday, September 11, 1922, and con-tinue for two weeks, closing Saturday, September 23rd. Tuition for this special Post Graduate course, \$60.00. An especially attractive course is offered this year. All graduates of recognized osteopathic colleges are cordially invited to avail themselves of this opportunity.

This College is registered with the New York State Board of Regents. This means that it maintains the high standard required by that Board. It also means that grad-uates of this College are admitted to the examination for license to practice in New York State and all other states which maintain the New York standard.

Students who wish to be qualified to practice in New York State should be careful to select a College which is registered with the New York Board of Regents.

For the right kind of a course in Osteopathy extensive clinical facilities are needed. The clinical opportunities of Chicago are unsurpassed. No prospective student of Osteopathy should overlook the importance of these clinical opportunities. The College maintains an excellent Osteopathic Hospital.

In the Training School for Nurses there is room for a few more candidates. The Training School course is two years in length. At least one year high school work, or its equivalent, is required for admission. Tuition is free and after the probationary period of three months, stu-dent nurses are paid \$20.00 per month during the first year and \$25.00 per month during the second year. The student nurses receive board, room and laundry free, and two weeks' vacation or the second year. second year. each year.

For further information, address:

The DEAN

## Montana Osteopaths Invite You

Everyone attending the National Convention is invited to visit the Montana Osteopaths at their convention in Bozeman, Montana, July the 26th to 29th? A stop-off at Bozeman on the return trip will make a nice break in the journey, and we believe we will have a good convention. The Bozeman Osteopaths are arranging a banquet and entertainment at a mountain camp for one evening and they are also arranging a trip after the convention over into Yellowstone National Park which is nearby. Information about this trip can be had from Doctor L. V. Butler, Bozeman, Montana. Cordially yours,

GEO. M. MCCOLE.

## In Examination and Diagnosis

Remember that asthma and hay-fever are first cousins to epilepsy and insanity. If you ask about tuberculosis the patient will hedge and conceal facts. Ask about asthma and he will talk freely, and give you full story .-- James Waddell Lloyd, D.O., Bowman, N. D.

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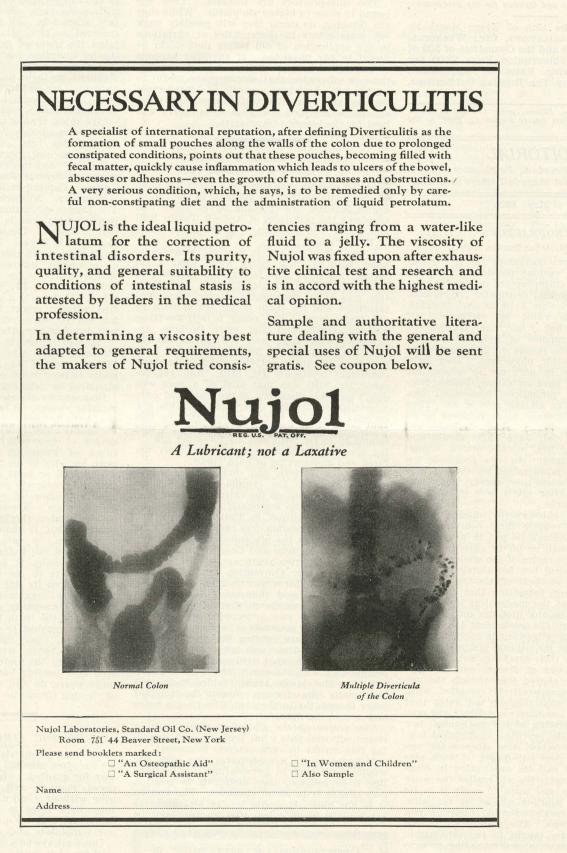
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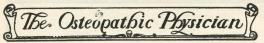
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EDITORIAL Fairness, Freedom, Fearlessness "Hew to the line, let chips fall where they will."

Vol. XLI May, 1922 No. 5

## CHIROPRACTORS

## C. C. Reid, D.O., Denver, Colo.

I note in our own magazines and in my correspondence that various physicians over the country refer to chiropractors and their relation to Osteopathy and osteopathic physicians. Many times we become hard in our thoughts. Our judgment is ruled by prejudice. course any mind that is under the influence of prejudice is not capable of judging correctly. Chiropractors are people of flesh and blood similar to osteopathic physicians. They have minds that know in part as do osteopathic physicians. They have ambitions, desires, feelings, preferences, prejudices, economical ditions to meet like all the rest of us. con-They have colleges with many more students as do the osteopathic colleges. The students are enthusiastic, cheerful, have their ideals and their estimates of life, morals, ethics, human relations and religion. In our judgment we should take into consideration all these things and there would be less time, energy, words and After all it is a question of breath wasted.

educational standards. The recognized chiropractic colleges among the chiropractors require three courses of six months each. This can be put in a year and a half straight work or all in separate years, all according to the desire of the students. They stress the mechanical law pertaining to health and disease, and in their efforts try to make it cover everything, forgetting that there are many conditions of the mechanical law, which must be obeyed in the dietetic and hygienic world, even though the mechanical law is perfect so far as body alignment is concerned.

They also forget the psychic law and do not seem to realize in their teaching that there are many psychic classes of disease and the psychic law must be obeyed even though the mechanical law is comparatively complied with. I am not saying that they do not know that these laws exist, but they are radical and onesided in their stressing of the mechanical law to the neglect of the psychic and chemical law.

The osteopathic school also stresses the mechanical law but does not forget to teach also the chemical law and its application in diagnosis and treatment. We all realize the more we study this law and learn to apply it in its details that our solution almost, if not altogether, comes through scientific dietetics and hygienic applications. The application of the psychic law is also taught in the osteopathic colleges with a view to understanding how to treat and diagnose diseases by suggestions or otherwise according as the psychic law is transgressed.

With this broad combination, Osteopathy has naturally devolved into much higher standards, greater preliminary requirements and longer courses of study in order to meet its conception of what a physician ought to be. Every Osteopath should be open minded, ready and willing to accept suggestions and back up good things from any source.

The chiropractors are thinking. They are bound to come to higher standards. While they are thinking, no doubt they will possibly work out some points in therapeutics or variations in the application of old points that might be useful to any physician. If anything happens to come thru by way of literature, demonstrations or otherwise, that should prove useful to osteopathic physicians according to intellectual honesty and scientific truthfulness, the point should be accepted for what it is worth and used for the benefit of humanity.

## STILL VERSUS PALMER J. C. Howell, D.O., Orlando, Fla.

At the present time there is a great but more or less silent controversy going on in the United States between two opposing forces, those who represent the principles of Andrew Taylor Still and those who represent the principles (sic) of B. J. Palmer.

I was about to say it was my pleasure to know both of them fairly well; what I am forced to say is that it was my pleasure to know Dr. Still and I also know B. J. Palmer. One was quiet, democratic, a man who loved principles and the plain people better than he did filthy lucre. The other is self-assertive, pushing, commercial and more in love, apparently, with lucre and self-aggrandizement than the public good. No Osteopath will hesitate for a minute in deciding which of the above characters represents Dr. Still. And yet, because Dr. Still was that kind of a man who didn't push his discovery to the front and commercialize it like the other man did, his discoveries are being boldly appropriated by this blatant imitator, and credit and honor that should go to Dr. Still and his followers are being absorbed by those who are absolutely unfitted and undeserving of such credit.

I, for one, believe, and shall always believe that truth needs her champion and that we should have shown up the chiros for what they are right from the beginning. I remember, at an A.O.A. convention in Philadelphia a few years ago, the question was taken up and some of the leaders in the profession decided it was better to ignore them and thus the matter was Only two years ago at the Florida dropped. State Osteopathic Convention in Jacksonville, the question of chiros was brought up and reso lutions were passed that we kill them with faint praise or words to that effect. In my own town when two appeared I took up the cudgels in the newspapers and spent many hard-earned dollars fighting the cause of Osteopathy until no doubt was left in the minds of the public as to what Osteopathy and chiropractic was, with the result that the two chiros here, like the classic Arabs, "folded their tents and quietly slipped away," despite the fact that other Osteopaths in the town lifted not a voice or a sou in the fight.

The editor of the Christian Register in a recent editorial puts what I wish to say regarding this matter in very concrete language:

"People say, in a controversy, 'we wish you would not resort to personalities." They dislike it in religion, they dislike it in politics, they dislike it in social problems. The fact is, it is not nice. It would be far pleasanter to act on the assumption that people may be

Communications or news matter intended for publication in The OP ought to be, if possible, typewritten and double spaced, so as to make possible editorial revision between lines without recopying. —Editor

aroused by the polite statement of abstract principles. But people are not so aroused. No victories are won in the realm of impersonal generalities. There was never a great move ment in history but it quickly became identified with some man. Some man, as a matter of fact, started it. All the praise, all the blame, centered on him. It is not that a personality takes the place of principles, which the Manchester Guardian mistakenly affirms, but rather that principles are illustrated, either in their violation or their fulfilment, by a man. And until they are so illustrated the cause lags. Indeed, it is doubtful if the people realize there is a cause until a man appears.

"We think always in terms of individuals, as we have once before remarked in these columns. History has been called the biographies of great men, and there is much truth in that definition. Any one readily cites examples. The gospel of love is Jesus. The Reformation is Luther. Capitalism is Gary. Trade unionism is Gompers. Militarism is the former Kaiser. definition. The League of Nations is Wilson. The limitation of armament is Hughes. National isolation is Borah. The recrudescence of hostility to science is Bryan. The threatened Protestant Inquisition which this journal has assailed with a thoroughly informed understanding of the danger which is by no means past, is Laws. ('Osteopathy is Dr. Still, imitation B. J. Palmer'). If there is a way of advancing civilization without resort to personalities the race has not yet discovered it. We think it never will discover any other way.

"Human nature is exceedingly concrete. It wants to know who represents a given idea. Who is back of it? It is deplorable that the easily twisted mind of the plain people is manipulated by demagogues."

Demagogues are stealing Osteopathy from its rightful owners. It is time that the Osteopaths that have backbone rise in their dignity and let the world know to whom the honor of the discovery of Osteopathy and bringing it to the town and city in the United States should have Every hamlet. a champion or local organization that will see that the public are put right every time a controversy comes up regarding Osteopathy and its imitators. Whenever a person is injured by an imitator, the fact should be given to the Also, it should be made plain to the that "a case well diagnosed is half public. people that "a case well diagnosed is half cured," and the imitators not only don't diagnose but claim it is absolutely unnecessary The fight is to the death; either Osteopathy with right on its side will win, or the imitators with their organizations and publicity will strangle Osteopathy and absorb, not only the honor, but the truth that is in Osteopathy. "Truth crushed to earth," we are told, "will

"Truth crushed to earth," we are told, "will rise again," but like anything else that is crushed to earth, truth needs a helping hand. It is up to the Osteopathic Physician to extend this helping hand and that hand should mean yours, as well as mine. It is not a case of "letting George do it."

## DO YOU LIKE THEIR STUFF?

By some peculiarity of our human makeup we too often take the good things that come our way for granted. Thus many a service is rendered, many a well written article is passed over without a word. On the other hand, let some little thing in an article or service displease us and we are up and doing, voicing our complaints and registering our kicks.

our complaints and registering our kicks. Don't always be a discounter! Criticize? Yes, criticize—but justly and constructively. Don't always analyze and pull down, but piece together and build up sometimes, too. Give credit where credit is due. Register the kicks to be sure, but don't forget to throw an occasional flower too! If deserved, make it a bouquet, even!

AOA Convention, Los Angeles, Week of July 3rd

If your confrere has written a particularly cceptable article and you like it let him know hat you like it. Should there be something incorrectly said, point it out but in a friendly and how it is to be corrected. Don't be too spring of your praise. A word of apprecia-tion where earned makes for better fellowship and stimulates to greater endeavor.

Look through this copy of The OP. Don't you find some really fine articles, or at least views expressed that coincide with or are against your views? What are your ideas on the subjects under discussion? Write the authors or, if you prefer, write us. The authors will appreciate it, we will appreciate itthus working in unison, our combined efforts should produce a much greater good.

## Ye Olde Apothecary Shoppe

Wm. S. Settle, D.O., Peterborough, Ont., Canada COUPLE HUNDRED years ago.

AN APOTHECARY scanning.

HIS SHELVES would see.

EPAR LUPI or wolf liver.

PULMO VULPIS or fox lung.

CERVI OS de corde.

OR DEER'S spine.

LANA SUCCIDA or sheep's wool.

LUCII MANDIBULA, which was.

THE TOOTHED jaw.

OF A pike.

PILI LEPORIS and talus leporis.

WHICH TRANSLATED means.

RABBIT'S HAIR and foot.

STILL MUCH prized.

BY OUR colored brethren.

GALLSTONES OF an ox.

WHILE SPARROWS, scorpions.

AND CENTIPEDES were burned.

TO MAKE glorious.

THE KINGDOM of Aesculapius.

POOR SINNER'S fat.

AND HUMAN skulls.

AND THE oil.

OF HUMAN bones.

ALSO GOOD medicine made.

LAUGH WELL you may.

BUT IN an hundred years.

AN ENLIGHTENED world will.

LAUGH ITSELF to tears.

OVER THE kind of dope.

YOU TAKE today.

The fundamental principles of Osteopathy are as old as the human race and its roots sink deep

# Some Patients I Have Known

## VIII

## Eager for an Operation

John Barr, D.O.

A great many patients come to the osteopathic office solely because they hope to avoid an operation by so doing. Hap-pily, this result is often obtained. Occasionally comes one who has not quite made up her mind on this point.

Some doctor has told her she ought to have an operation. Chances are, he told her so to get rid of her. However, she plays with the thought fearsomely but still cannot help but be fascinated with the prospect. She knows that if she had an operation, in her small neighborhood she would become one set apart, especially after she had embroidered the dull truth of the hospital days with the fond fancies of her own invention. Still, an operation is an operation. If

only she could get the Osteopath to agree that she ought to have one, she might be sure of herself for she knows from hearsay that they never advise one unless it is imperatively indicated.

So in she comes. Her history is in-definite, her pain is vague. You advise a short course of treatment to see what it will do for her. She assents for that will give her time to make up her mindand perhaps yours also.

Yes, the treatments seem to help and yet they do not just get at the trouble. You go over her carefully again, trying to tie down the elusive pain. You are not quite ready to classify her as a neuras-You are not thenic and you would like to save the poor woman from an operation for she has already told you that she fears she will have to come to one some day.

Vainly you seek a physical basis for the trouble. The pelvis is clean, the abdomen is negative, the mind, you are be-ginning to suspect, is slightly clouded.

Still your patient continues under your care. She has by this time secretly deter-

into its consciousness.

Time's tireless trituration will neither change or displace it.

Getting well in a new and better way, by the pushing, shoving or manipulating of the little bones of the spine back into proper alignment with their fellows, the mechanical adjustment of what is structurally wrong with the patient, and thereby curing his illness, may seem odd to some, but there are millions who have tried it and found that it works just like a charm. Osteopathy as a profession is most honored where it is best known; it stands a more intimate acquaintance.

## Admit Evans on His Record "Scothie!"

I never was busier in my life. Since May I have been secretary of our local Rotary Club, and there's so much work connected with the job that I am at times almost overwhelmed. Now they have decided to get out a weekly bulletin, and I shall be the editor. Oh, you just can't keep a good man down. Nor an edi-tor out of a job! I figure this will pay me almost as well as osteopathic editing did-and you know that wasn't much-but my worse fear is that this may not entitle me to put my feet under the table at Scothorn's Los Angeles dinner, eh?-A. L. Evans, D.O., Miami, Florida.

mined that she will never be a well woman until she has had an operation and furthermore she is equally deter-mined to have your approval of the decision.

Finally, in desperation, you advise her to have a complete gastro-intestinal X-Ray examination. Such an examination, you feel, may either produce some hidden condition or it may effectively prove to her that there is really nothing on which to operate. The patient consents, never batting an eye at the expense. She is just as anxious as you to exhaust every means of diagnosis. She has already de-cided that it will make a much better story to tell at afternoon tea if she can include all these preliminary details. You miss her with a great sense of re-

lief for the week during which she is un-der observation. Then she and the Roentgenologist's report arrive together. She is all worked up to know the fatal news. Boiled down from its two pages of de-tailed findings, it says that this patient has a moderate degree of ptosis and considerable colonic gas.

You assure her that there is absolutely nothing which indicates an operation and at last she gives you up as hopeless. By now she knows she has just got to have that operation with or without your consent.

Out she goes and that is the end of her. as far as you are concerned. Two months later, one of your faithful chronics comes in and regales you with the tale of the wonderful operation that Dr. So and So what did he do? Oh, took out her appendix and separated some adhesions. Wearily you shake your head and privately wonder why God ever made some women-and some doctors.

## LIVING

To spread a little joy each day— To do our work in a cheerful way— That's living. To know we've done what's good and right— To go to bed in peace at night— To wake up feeling fit and bright— That's living.

## STICK

One step won't take you very far, You've got to keep on walking; one Word don't tell folks who you are, You've got to keep on talking. One inch don't make you very tall, You've got to keep on growing; one Little ad won't do it all, YOU'VE GOT TO KEEP THEM GOING.

## THE FARMER'S PLAINT

Back is awful achy; I'm feelin' dredful blue; Surgery left me ailin', drugs have failed me, too. Not a pleasant prospect, ain't sick enough to die, Gittin' wuss each year, though—be crippled bye' 'nd bye. Some tell me I am foolish to stand this pesky pain, An Ost'opath could help me be young and well again.

again. I ain't got faith in new things, but since I feel so sore, I guess I'll try that doctorin' a month, or maybe

nore. If I can git my health back, an' git to work, you see, That "back manipulatin'" will mean a lot to me. —J. B. W. Hall, D.O., Caribou, Maine

# Osteopaths Advertise, Showing Change from Old Time Beliefs

## By John H. Sines in Trenton (N. J.) Evening Times

One by one the old ideas are passing. Professional men used to think it was unethical to advertise. At least they professed to think that way—although none of them ever

to think that way—although none of them ever ventured an opinion as to why. Now the most intelligent and progressive practitioners in all professions are agreed upon the value of publicity.

Doctors, dentists, lawyers and others now join with teachers and the like in the use of paid publicity—display advertising at regular rates. Men, and women, too, of this type no longer depend upon free reading notices. Professional people who refuse to advertise and who seek so-called puffs, or write-ups, are now the exception. They used to be the rule.

Theatrical people who from the time when the memory of newspaper men runneth not to the contrary sought in every possible way for free publicity, now turn their attention to the advertising columns of papers and gain their professional notices as such advantage is gained by people in other professional and business lines.

Many business and professional leaders go even further than that—they hold, as it was stated the other day in the Philadelphia Record, that "it is an economic crime to make or possess that which fills the public want and not let the public know about it."

Dr. Royal S. Copeland, health commissioner of the city of New York, said not long ago that he had been receiving messages from physicians congratulating him on certain features of medical ethics which he had described as "medieval." These messages also urged the commissioner to keep up the attack on the old-fashioned tendency of physicians to make a mystery of knowledge and let the public know as little about it as possible.

"The medical profession," Dr. Copeland declared, "quietly allows millions of people to continue in ignorance of great strides in medical practice which would quickly cure many who are now letting themselves die through the fear of doctors and hospitals. Whenever the medical profession has been induced by progressive men to fight disease with publicity, as is being done now in the case of tuberculosis, marvels have been accomplished. Much good has been done by publicity in fighting cancer, but not as much as should be done."

Continuing his discussion of the subject, Dr. Copeland said: "I want to see medical men use the engine of publicity to enlighten the public and combat disease which kill hundreds of thousands because there is not the contact between the medical man and the public that there should be, and because so many, through fear or ignorance, fail to obtain treatment in the initial stages of a disease which might be cured if taken early and cannot be cured later. The great majority of the people of this country, I believe, are ignorant of the great progress which has been made, for instance, in the use of anaesthetics, which has robbed operations of much of their terrors."

Dr. Copeland believes that if doctors were not so "ethical" as to refuse to make known to the public their ability to successfully treat certain diseases and afflictions, "disease would be wiped off the face of the earth," and that there are surgeons in America as competent as is Dr. Lorenz, the famous Austrian, to treat cripples, but they never make known their qualifications.

"There is," as Dr. Copeland concludes "something wrong with the system that makes it impossible for the sick or the crippled person to know that he can be healed; and the fault

is with the medical profession, which has been unwilling to advertise what it can do."

Here in Trenton and vicinity, as elsewhere throughout the country, Osteopaths are advancing their own interests and adding to the service they render to humanity by a systematic campaign of advertising. The American Association of Osteopaths have adopted advertising and have set aside the sum of \$50,000 for an initial campaign. "Our association," said one of the members

"Our association," said one of the members recently, "has endorsed advertising of an educational nature, because we feel that we should get away from the obsolete principle that publicity is ethical only so long as it is free."

A director of paid advertising has been appointed by the Osteopaths and he employs an expert ad-man to prepare copy, which is censored by a committee of members. The intention of the series is to acquaint the public with the truth as to the principles of Osteopathy; with its colleges and institutions; with its hospitals and sanitariums; with its research institutes; and with its advancements of therapeutic science in its own distinctive lines.

Edwin T. Jones, writing in The Fourth Estate, of New York City, in part says: "If this campaign proves to be successful, larger ones will follow. There are over 7,000 practicing Osteopaths in the United States, and a yearly contribution of \$50 each would give the A.O.A., a fund of \$350,000. This sum judiciously spent would greatly increase the demand for Osteopathy, and I think largely increase the desire of young men and women to study the treatment."

Osteopathy was started in 1874 by Dr. A. T. Still, a western physician and surgeon of thirty year's experience. It has developed through nearly half a century of thought and effort until it has spread throughout the country and beyond. Great universities and hospitals have been founded and much research work has been instituted. Ten thousand practitioners have been trained and sent forth on healing missions every where. Trenton has five of these doctors who have joined in the national association's advertising plan.

There is great educational value in such campaigns. Everybody reads these days and greater results can be obtained through publicity than in any other way. Much disease has been prevented by giving publicity to preventive measures. That is why the Times publishes one of Dr. Copeland's health articles daily. Many cures have been effected through proper presentations of curative agencies. Much illness and many deaths have resulted through ignorance; through the failure of those who know to acquaint those who do not know with the means of prevention and cure.

Surely there is nothing unethical about saving life and averting suffering through publicity. It is, indeed, a crime not to acquaint the people with whatever is for the public benefit.—April 19th.

## Treat Football Players?

The more I think about your idea of our caring for football teams, the bigger it looks to me. Since writing you I have read an article, "Football and the Osteopath" by A. M. Weston, in the October Western Osteopath. Can't you make a special drive to get shop talks on "What I Did for the Football Team?" It ought to bring out a lot of fine points both as to treating injuries and promoting Osteopathy—Geo. M. McCole, D.O., Great Falls, Montana.



A scene from the flooded district of Illinois. Dr. H. W. Welch of Beardstown is shown returning from or about to embark on a call.

## A Voice from the Flood District

Gentlemen: Sent list of names today for the "million run" pamphlet. Please do not mail pamphlets before June 1st. Water is out of the business section now but many residences are in one to eight feet of water yet and it will be June 1st before people can get moved back home and mail delivery established. Thanking you for your consideration in this, I remain fraternally—H. W. Welch, D.O., Beardstown, Illinois.

## Enclose Stamped and Addressed Envelope

You might tell our professional brethren who write to Florida D.O.'s inquiring about climate and prospects for practice to send postage. We spend enough in time without being expected to pay out our money.—A. L. Evans, D.O., Miami, Florida.

## Justice to Dr. J. Stewart Moore

Dr. Ada N. Foote of London, England, has called our attention to a mistake in the November issue of The OP. In the article entitled "Wonderful Progress of Osteopathy in the British Isles" on page 2 mention is made of the toast proposed by Dr. J. Stewart Moore of London. It reads "in both countries great advancement was being made (in Osteopathy) and this not so much because of the inherent rightness of the principles of Osteopathy." It should have read "in both countries great advancement was being made and this not so much because of the individual merit of certain Osteopaths or the loyalty of their friends but because of the inherent rightness of the principles of Osteopathy." The error is self-evident and was due to a line of copy being dropped by a compositor.

# Faculty of the New A. T. Still College of Osteopathy and Surgery

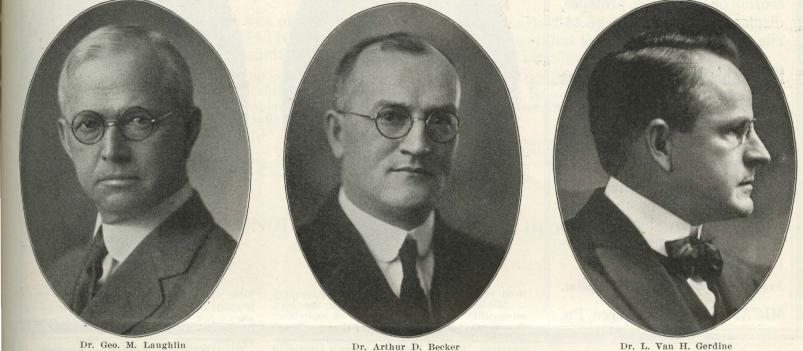
Much interest will be felt by the profession in the announcement of the personnel of the faculty which has been signed up by the new A. T. Still College of Osteopathy and Surgery. The group of men embraces well known vet-eran teachers and practitioners who are entirely worthy of the new institution, and The

# OP congratulates Dr. Geo. M. Laughlin on his

selections as far as they have been made. The list is as follows:

GEORGE M. LAUGHLIN, D.O., General Surgery and Orthopedics. Graduate American School of Osteopathy, 1900. Postgraduate Chicago School of Surgical Technique. Clinical work in

Surgery in Chicago, New York, Rochester and other cities. Dean American School of Oste-opathy 1901 to 1917 inclusive. Dr. Laughlin organized and built the Laughlin Hospital in 1918 and is chief surgeon in charge of that in-stitution. He is nationally known not only Sutution. He is nationally known not only through his accomplishments in surgery but through thousands of successful orthopedic operations. Dr. Laughlin is the founder of the new college and is President of the corporation. ARTHUE D. BECKER, D.O., Principles and Practice of Osteopathy. Graduate S, S. Still



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Easy to Use

as an astringent, antiseptic, styptic, antiphlogistic and tissue toning local application in vaginitis, urethritis, cervical erosion or ulceration, prolapse, displacements, cystocile, rectocile, pruritus, eczema, etc.

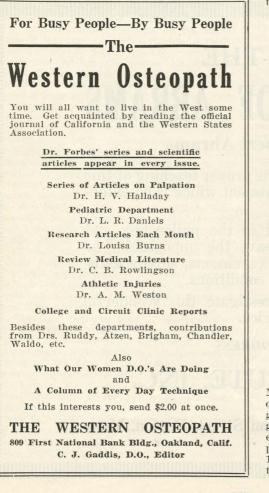
## **Micajah's Medicated Wafers**

are prompt and prolonged in action, free from irritating or toxic properties, soothing and healing to a degree.

Originated by a practical physician, their use by the medical profession h as been steadily increasing over a period of many years.

Sample and literature on request.

MICAJAH & CO., Warren, Pa.



College of Osteopathy (now the Des Moines-Still College), Des Moines, Ia., 1903. Graduate American School of Osteopathy four years course, 1910. Instructor in gynecology and practice of Osteopathy for two years in the A.S.O. After graduation Dr. Becker pracMacon, Missouri. He will deliver several letures each week in the Andrew T. Still College Roy M. Wolf, M.D., D.O., Anatomy. Gradu-

ate American School of Osteopathy, 1912. M.D., Kansas City University of Physicians and Surgeons, 1921. Postgraduate Chicago Eye, Ear,



Dr. Roy M. Wolf

ticed ten years both in the city and country in Minnesota. For nine years he has been osteopathic member of the Board of Examiners of that state and has twice served as the president of the Minnesota State Osteopathic Association. He was for three years a trustee of the American Osteopathic Association.



Dr. A. C. Hardy

Nose and Throat College. Several years in practice in Montana and a well known leader among the northwestern Osteopaths, devoting his special attention to acute diseases and obstetrics.

PAUL D. HIGBY, Medical Jurisprudence. A.B., University of Missouri, 1909, LL.D., University



## Dr. Paul D. Higby

L. VAN H. GERDINE, M.D., D.O., Mental and Nervous Diseases. Graduate American School of Osteopathy; M.A. degree, Harvard, M.D. degree, Rush Medical College; three years postgraduate study at University of Berlin, in Vienna, Heidelberg and London; professor of physiology, nervous and mental diseases, A.S.O., 1902-1917. Dr. Gerdine is chief neurologist in the Still-Hildreth Osteopathic Sanitarium in Dr. Frank L. Bigsby

of Missouri, 1911. Mr. Higby served as prose cuting attorney for two terms and during the past four years has been prosecuting attorney for Adair County, Missouri.

DUDLEY B. TURNER, D.O. X-Radiance and Chemistry. Graduate Columbia University College of Pharmacy, 1905; graduate American School of Osteopathy, 1915; Still-Hildreth Sani tarium, Macon, 1916; instructor in Chemistry

"Where There Is No Vision the People Perish"

# HOW CAN YOU TELL UNLESS YOU TRY?

A clinical test of DIONOL in any condition marked by LOCAL INFLAMMATION will convince the most skeptical that DIONOL produces definite and in many cases remarkably beneficial effects.

DIONOL is intended for local application only; over the chest in pneumonia or bronchitis, over the throat in tonsillitis, etc. Its action depends upon and is explained by certain scientific principles governing the electropathology of inflammation.

Its clinical results have been such as to have brought about its steadily increasing use by the profession. You owe it to your patients as well as to yourself to TRY DIONOL. A clinical test will speedily demonstrate its practical value and its actual efficiency.

> Samples, literature, case reports, price lists to physicians on request.

> > -

THE DIONOL CO. Dept. 12

**Acute Infections of the Nose and Throat** 

The great dangers of naso-pharyngeal infections extending to the various sinuses and ears, or of being the fore-runner of graver respiratory diseases, particularly pneumonia, make painstaking and effective treatment of even the simplest cold both urgent and necessary.

The ease with which Dioxogen will quickly control the great majority of colds, and not only avoid their obvious dangers, but give the patient gratifying relief from local congestion, with its often severe discomfort and distress, emphasize the desirability of employing it at the earliest evidence of an infection.

New York

Owing its efficiency to the liberation of pure active oxygen-Nature's own antiseptic-it is no wonder Dioxogen fills the place it does in the treatment and prophylaxis of nose and throat colds.

# The Oakland Chemical Co.

**59 Fourth Avenue** 

"Two to four teaspoonfuls of Dioxogen to a half glass of warm water makes an ideal gargle or nasal spray."

NOSE AND THROAT COLDS At the earliest possible moment the nose and throat should be swabbed thoroughly though gently with cotton pledgets saturated with Dioxogen, dilut-ed one part to three of warm water, especial care being used to reach back of the faucial pillars. If the condition indicates a severe infection, this swab-bing by the medical attendant should be done twice a day. In addition, the patient should spray the nose and throat every hour or two with Dioxogen in a strength of two to four teaspoon-fuls to a half glass of warm normal salt solution. The rapid control of the infection means grateful relief and the effectual prevention of complications and sequelae.

THE DIOXOGEN TREATMENT OF NOSE AND THROAT COLDS

Detroit, Mich.

nervous and mental diseases, Philadelphia College of Osteopathy, 1917-'22; Roentgenologist, Philadelphia Osteopathic Hospital, 1917-'22.

A. C. HARDY, M.D., D.O., Eye, Ear, Nose and Throat Surgery. Graduate American School of Osteopathy, 1911. Special work in pathology and bacteriology, University of Chicago. Prac-



Dr. John Halladav

tice of Osteopathy (general practice) Lockhart, Texas. Medical and special training Tulane University and Tulane Post-graduate School of Medicine, New Orleans, La. Eye, ear, nose and throat practice, Austin, Tex. Special work Illinois Charitable Eye and Ear Hospital and Chicago Eye, Ear, Nose and Throat Hospital,



Dr. Earl H. Laughlin

Chicago, Surgeon in Charge, Eve, Ear, Nose, and Throat Department, Laughlin Hospital. FRANK L. BIGSBY, M.D., D.O., Gynecology, Obstetrics, Genito-Urinary Diseases, Proctology, M.D., Iowa University Medical College. Postgraduate Northwestern University, Chicago. Postgraduate, New York Postgraduate Hospital. Interne DeLee's Lying In Hospital, Chicago, Graduate American School of Osteopathy, 1902.

Urological School, United States Army, 1918-19. Member of staff at Laughlin Hospital. JOHN HALLADAY, D.O., Instructor in X-Radi-ance. Graduate American School of Osteo-pathy, 1920. Member of Staff Laughlin Hospital.

EARL H. LAUGHLIN, D.O., Physical Diagnosis and Laboratory Diagnosis. Graduate American School of Osteopathy, 1903. Postgraduate American School of Osteopathy, 1906. Postgraduate course physical and laboratory diagnosis Massachusetts General Hospital, Boston, under Dr. Richard Cabot. Member of the staff of Laughlin Hospital since its organization. Dr. Laughlin is noted as a technician in osteopathic practice and has devoted considerable time to a study of the science of diagnosis.

## Amateur Theatricals R. K.'s Hobby

Dr. R. Kendrick Smith of Boston participates in amateur theatricals as one of his hobbies. Just now he is doing the unusual stunt of háving leading parts in four different plays produced at about the same time. One of these is particularly interesting as it is based upon psycho-analysis. It was written by a well-known Boston physician and in it Dr. Smith plays the part of the psycho-analyst. He also has the role of one of the prophets in a big spectacular production of a biblical play at the National Theater, Boston. This season's work also includes the play by the author of Mr. Penn and one of the leads in "Pomander Walk."



# If the Profession does not support its Institutions who will?

We accept for treatment all kinds of Hospital Cases. Our services are compared favorably with that of any hospital anywhere. All departments completely equipped with the latest apparatus for diagnosis, treatment or surgery. For information address the

SOUTHWESTERN OSTEOPATHIC SANITARIUM, Blackwell, Oklahoma



# The Delaware Springs Sanitarium, Delaware, Ohio

All that is desirable and essential in a hospital or sanitarium is included in the equipment. Diagnosis First. Cure Follows. Health and Happiness the Result

The Delaware Springs Sanitarium

Delaware, Ohio

# New Orleans Osteopathic Clinic for Children Shown on the Silver Screen!

March 19th to March 25th was Osteopathic Week in New Orleans. Osteopathy ruled the town; Sunday and daily newspapers in big and bold front page headlines, in columns on columns of type and large illustrations, told of the doings of Osteopathy; leading movie houses fashed osteopathic pictures on the screen. Responsible for all of the above was the opening of the New Orleans Free Osteopathic Clinic for Children by Dr. Henry Tete and his assistant, Dr. Eugene Bueler. New Orleans' crippled and suffering little ones will all be taken care of in the Clinic, all receive relief in their pains and many even entire cure through Osteopathy's remedies. Let Dr. Tete, himself, tell how it happened:

Dr. Sammuel L. Scothorn, President AOA, has a happy faculty of getting people to do hings they ought to do, but who somehow or other simply have not done them. I have often wished that we had a Free Clinic for Poor Children, but there were at least twenty reaons why I did not start one. When, therefore, Sam Scothorn wrote me and told me that he



Dr. Tete examining a 14 year old boy with a body of a child of 5 or 6 because of a curvature of the spine.

wanted me to open a Free Clinic in New Orleans, I wrote back and told him that with seventy-five people a day to treat and with only one assistant and with my duties as Secretary of the State Board of Examiners, Secretary of the State Association and Councillor for the Osteopathic Council of Defense and Education "which was my pet hobby," together with my series of lectures, etc., etc., I could not do it. Here is where he got in his fine work. He wrote back that on account of the very reasons I mentioned I was the right man to start the Clinic.

Now I had no more idea of how to start a Clinic than I have of how to fly, so I wrote to my friend Dr. Millard and got a printed form telling me exactly how to do it. I read it very carefully and I wish to recommend it to anyone who wishes to start a Clinic.

The first thing I did was to write a letter to the editors of the three leading daily newspapers upon my State Board letterhead, informing them that at the request of President Scothorn, I would open up the following morning a Free Clinic for the Poor Children. I invited them to send a representative.

I did not know where to hold the Clinic. I considered several hospitals to which I could gain entry and several church societies, but I decided to use my own office, having four large operating rooms and a large reception room, capable of handling fifty or seventy-five people. I decided to make it an early hour so as not to interfere with my regular patients, so I made it 8 to 9 A. M. on Wednesdays and Saturdays.

Tuesday night I went to bed in a peculiar frame of mind. I said to myself that I had

bitten off a big chunk of work and that I must get up early to tackle the job. Wednesday night I went to bed happier than in a long time: I felt I had started something for Osteopathy. The first case in the Clinic was a little Russian boy with a deltoid paralysis, which some idiot had immobilized in an extended position with the forearm flexed and had kept it so for eighteen months. With the assistance of two friendly surgeons and a plaster cast expert, in one hour we succeeded in cutting



Clinic scene from Dr. Tete's Osteopathic Film. "The pictures were taken by the Harcol News Service and as far as I know are," says Dr. Tete, "the first moving pictures of an Osteopathic Clinic taken by a News Service." In the three hundred feet of film is shown a group of crippled children, each child receiving individual examination and such treatment as the particular case calls for. The picture was shown in the leading picture houses and, it is estimated, viewed by a hundred thousand people who had never before seen an osteopathic treatment. Film is available for use in your home town if you desire it. Dr. Tete will gladly send information to any one interested.



STILL-HILDRETH OSTEOPATHIC SANATORIUM MACON, MISSOURI

A. G. Hildreth, D.O., Supt.

The pioneer Osteopathic Institution of its kind on earth created for the sole purpose of treating mental and nervous diseases, an institution that has already proven the value of osteopathic treatment for insanity. Write for Information



Dr. Nichols' Sanatorium, Buildings and Grounds, Savannah, Missouri Exclusively for Treatment of Cancer. Our New Booklet of 194 pages, entitled "Cancer, Its Proper Treatment and Cure," Mailed Free of Charge upon Application.

# Special Information for Osteopaths

Under the laws of some States osteopaths are prohibited from using anything of a drug nature.

Dionol and Emulsified Dionol have no drug contents whatever and hence do not come under these restrictions. Their action is in strict consonance with osteopathic principles, being entirely mechanical, hence no drug re-actions are possible.

Osteopaths, throughout America, are using large quantities of these preparations, and there has never been a legal exception taken to their use, excepting in one case, and when the authorities learned the above facts the case went by default and they never even appeared against the doctor in question.

Dionol treatment is the only remedial agent that we are aware of that acts strictly in a mechanical sense and without drug reaction and which may be safely employed, internally or externally by drugless physicians generally.—The Dionol Co., Garfield Bldg., roit, Det Mich.

## The Seashore Sanitarium

An electric elevator has just been installed, an added feature for convenience and comfort of guests.

Rooms have been renovated and enlarged.

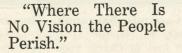
A real home, in which guests receive individual and expert service in

## Osteopathy

## Diet General Care

The best place for your tired, run down, exhausted patients.

The Wayne-Leonard 130 South Maryland Ave. Atlantic City New Jersey



away this medieval coat. The condition of the child when the cast was removed was pitiful. The head of the humerus was an inch and a half down and away from the glenoid cavity. The deltoid seemed entirely gone. The newspaper reporters sent for their camera men and took pictures—before I forget it I want to say that this case after six treatments is able to move the shoulders and wiggle the fingers and that the separation has about disappeared.

Several cases of birth palsies and several cases of post Poliomyelitic paralysis came next. The newspapers came out in headlines across the face, "Free Bloodless Surgery Clinic Opened for Poor Children, Osteopathy does much good in New Orleans," etc. The following Clinic morning, which was Saturday, our cases increased to five or six

The following Clinic morning, which was Saturday, our cases increased to five or six more and the movie people stimulated by the newspaper publicity, which I had secured, asked permission to take pictures, which was granted them.

These pictures as far as I know are the first pictures showing upon the screen an Osteopathic Clinic, showing the examination and treatment of the children osteopathically. They were wonderfully well received by the public, and were shown in the Strand Theatre and in other leading moving picture houses. The Junior Orpheum, for instance, with a seating capacity of 2,000 people with five shows a day, exhibited these pictures for four days at each performance. In all, I judge that over 100,000 people, who had never seen an osteopathic treatment and examination and who did not know anything about Osteopathy, had the opportunity of seeing a visual representation and reproduction thereof. Seven other moving picture houses continued to show these pictures in suburban houses, after which the pictures were sent to any cities where there is a local demand for them as an Educational Film.

One thing above all these pictures show and that is the specific adjustive technique—clearly showing that Osteopathy is not massage.

Of course these pictures were taken without previous rehearsal or drill. The examination and treatment was given to children whom I had never seen before and who had never been treated and consequently we were astonished at the good results obtained. The pictures cover about three hundred feet of film with the titles.

So wonderful indeed were these pictures that I have in mind the preparation of a 1,000 foot film of an Educational Character, with patients of different types, showing the technique used in different corrections, such as cervical, upper and mid-dorsal, lumbar and pelvic adjustments, together with such detailed scenario as would bring out clearly the fact that Osteopathy is "That School of Healing which lays chief emphasis upon Structural Integrity and which for the *most part* treats disease by adjustment." Our Clinic has grown to thirty-six children. We handle (that is myself and assistant) this number easily in two hours. They all seem to be doing well and although I have always been a specific technician, I have proved to myself that the short, snappy, specific adjustive manipulation is real Osteopathy.

My message to those who are able to do so, is to start a Free Clinic in each city of over 5,000 people. You can make the time, you can do the work, you can succeed and you will be surprised how the public will rise up and back you up and how they will be loud in their praises. It is indeed another exemplification of the saying, "It is more Blessed to Give than to Receive." It is an application of our Rotary Slogan "Service above self."

## 1874-1924

Why not start the ball a rolling for a rousing celebration of the Semi-Centennial of Osteopathy?—John A. Cohalan, D.O., Philadelphia, Pennsylvania.

# **Natural Therapeutics**

is playing a more and more important part in the prevention and cure of disease. It is the hope of suffering humanity—taught and clearly explained in the

## LIBRARY OF NATURAL THERAPEUTICS

By Henry Lindlahr, M.D.

A veritable mine of valuable information for physicians and laymen.

Volume 1—PHILOSOPHY OF NAT-URAL THERAPEUTICS—demonstrates the fundamental laws and principles underlying the processes of health, disease and cure; these laws destined to revolutionize the theory and practice of medical science are not yet taught or applied in any of the recognized schools of medical or drugless therapy.

500 pages, cloth, \$2.40.

Volume 2—PRACTICE OF NATURAL THERAPEUTICS—describes the most efficient natural methods for the prevention and cure of disease; raw food, milk diet, fasting, etc.; hydrotherapy; curative exercises; prenatal and postnatal care of the baby; treatment of acute and chronic diseases, including nervous, mental and psychic disorders.

432 pages, cloth, \$2.40.

Volume 3—NATURE CURE COOK BOOK AND A B C OF NATURAL DIE-TETICS—Part I, 1,000 vegetarian recipes. Part II, reduces food chemistry and curative dietetics to an exact science.

469 pages, cloth, \$2.40.

The principles in these and other books by Dr. Lindlahr have been successfully demonstrated for twenty years in the Lindlahr Sanitariums at Chicago and Elmhurst, Illinois.

Send for descriptive literature of the Library of Natural Therapeutics, FREE.

Lindlahr Publishing Company 527 So. Ashland Blvd., Chicago, Ill.



The Efficient Osteopath Dr. C. C. Reid, Denver, Colo.

XIII—Expenses Not Usually Considered

## HEALTH

(Continued)

Last month we were talking on the health and efficiency of the average doctor and what the expense is to one who fails to do the things in life that he should. This month we wish to continue the topic.

Fourth. Careless in diet. Most everybody eats too much carbohydrate material, sugar, starches, with meat two or three times a day, a little coffee and potatoes, white bread at every meal, and then winding up with some dessert of a starchy nature. A regular diet of this type is disease producing. People who eat these things regularly will have indigestion, auto-intoxication, fermentation, fevers, catarrh of the nose and throat, catarrhal deafness, tonsillitis, boils, carbuncles, constipation with a tendency to rheumatism, heart disease, Bright's disease, neurasthenia and mental inefficiency. A doctor working under a heavy pressure

A doctor working under a heavy pressure who wants to keep his brain clear should live regularly on a well selected diet consisting of whole grain breads, cereals, vegetables, fruits and dairy products, with very little meat. The average hotel or boarding house diet is not a balanced diet and contains many incompatibilities.

Fifth. No definite exercises, baths, or daily deep breathing for health. This heading is for emphasis, as it was spoken about in number three. Physicians who know the importance of definite exercises, hygiene and deep breathing do not need to have this point emphasized. However, from experience and observation, it seems that many physicians do not put into practice many of the things they know and especially a definite and well planned program along this line.

Exercises on rising, just before breakfast, are very beneficial and will go a long ways toward starting the day right. A hot bath should be taken once or twice a week for cleansing purposes and the cold bath should be a regular thing. Deep breathing should not be neglected. The room should be well ventilated so that the air will be fresh.

A regular program should be carried out along this line. Sometimes one may get a little tired of it, following it every day. A good solution for this is to skip a day or two and then begin fresh again. A good custom is to break up one's program once a week, say on Sunday and more often if necessary to keep up a proper relish.

Sixth. Unclean in person. We have known many laymen and even some doctors who were very unclean of body. They were so unclean that they developed a disagreeable odor. They not only did not bathe often enough, but they did not keep their teeth clean nor their mouth, hair, or finger nails. All this makes for a bad physical condition and of course reflects on the psychology. There is a tendency to gradual depletion of the health.

Seventh. Fear, anxiety, worry. Some people fear the loss of health, some fear dependent old age, and some doctors are continually fearful of the loss of practice. This makes them anxious and causes worry, which makes a favorable condition for the body to stock up with impurities, fail in its elimination and bring both the body and mind into a state of inefficiency. *Eighth. Envy, jealousy, hate.* These are three deadly poisons which belong in the field of the emotions. They will kill happiness, destroy friendship, pervert normal mental operations, corrode the soul and make it impossible for the one who harbors these feelings in the heart to do his quota of work and reap the harvest of a happy and contented life.

No one can afford to harbor jealousy or hate of his fellow practitioner or any other human being. It is a boomerang that will bring back without fail ultimately a state of psychological degeneracy.

*Ninth. Too much or too little clothing.* Some doctors get in the habit of wearing too many clothes, two or three suits of underwear in the winter time, all of which may be very thick. This has been known in a few instances. Those who do that usually go around shivering because their blood does not circulate well and they are trying to make up for lack of exercise or some diseased condition by putting on a great amount of clothing.

Occasionally we see a physician who takes pride in being able to stand up against exposure. Exposure gradually depletes the system. There is a certain hardening process where there is a reaction in the body to effort, exercise, or fighting the elements. Frequently, in our fight against the elements, the body is gradually overcome and after a while the pride goes down along with the health. One should not expose oneself for the purpose of hardening the body, rather one should practice hygiene, exercise, diet, etc.; observe the laws of health in a way to keep the body up to the best condition. This will make it better prepared to stand up against the vicissitudes of life.

Tenth. Nervous. A great many of our doctors are nervous. This is not a healthy state and no doctor can afford to have chronic nervous trouble. Not only is his disposition liable to get crabbed but his treatments are more liable to be jerky, unsteady and unscientific.

His personality suffers and his handling of patients may result in unhappy relations at any time. A doctor should take the means of watching his own health. He should be an example to his patients not only in keeping up his own health but in the observance of the laws pertaining to health, of which he is a direct representative.

(To be continued)

## **Touring Information**

Many of the Profession may desire to motor to Los Angeles to attend the A.O.A. Convention next summer. As Chairman of the committee of the Los Angeles Osteopathic Society having charge of transcontinental touring for next summer, I wish to extend every assistance towards making these trips pleasant and satisfactory in every particular.

factory in every particular. My wife and I crossed the continent by auto in 1920. In our transcontinental trip, starting rrom New York and extending through New England and thence westerly, I found that east of Kansas City the method of stopping at hotels. over night proved to be the most satisfactory method of travel. After leaving St. Joseph and Kansas City, Missouri, we used a camping outfit with a great deal of pleasure and a very considerable saving of expense. Anyone desiring to camp throughout the whole trip, however, can do so with considerable comfort, although the excellent accommodations for campers that are provided by the Western cities are not provided, or at least not so adequately, throughout the East. The trip can be made from New York to Los Angedes (if hotels are used throughout the trip) in from 12 to 14 days. It makes the trip much easier, however, if a complete day of rest is taken from time to time in order to lessen the fatigue of too continuous motoring. If the individual desires to camp west of Chicago, occasional stops of from one to three days will be found very advantageous. As stated above, we used our camping outfit west of St. Joseph, Missouri. We rested three days in Denver, one week at Estes Park, two weeks at Yellowstone National Park and four days at Lake Tahoe in the High Sierras. We found that it was a great advantage many

We found that it was a great advantage many times to get away from such beaten highways as the Lincoln Highway, the Pike's Peak Ocean to Ocean Highway, and other similar wellmarked roads, to travel over the less frequented roads, especially in such districts as Idaho, Nevada and some of the other Western States. The reason for this being that the heavy traffic had produced a very rough surface on some of the regular highways. Our experience in this line may be of considerable value to others.

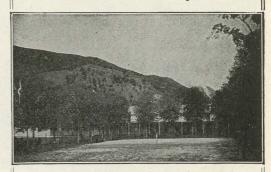
At the present time I am securing information regarding the condition of the roads over the various lines of travel and will be very glad to give information to anyone who is contemplating the trip to Los Angeles by auto. We shall try to secure reliable road information once a week, beginning April 1st and continuing to the first of July.

For further information adress Dr. R. D. Eméry, Chairman Transcontinental Touring, Los Angeles Osteopathic Society, 1418 Baker-Detwiler Building, Los Angeles, California.

## Emblem for Osteopaths' Automobiles

The "caduceus" has been officially adopted by the medical fraternity as an emblem. Placed on automobiles, it secures, in most states, the right of way over other traffic and a certain amount of police protection. We should have an emblem representative of Osteopathy which should be used by every D.O. owning an automobile. It should be sufficiently attractive to gain the attention of the laity so as to gain for us the same consideration and publicity as the medics receive. Who will design one?— M. F. Carson, D.O., Wilmington, N. C.

Chico Hot Springs Sanitarium and Hospital



Located in the heart of the Rocky Mountains at an elevation of 5000 feet. Open the year around.

The Mineral Water baths and drinking is second to none for Rheumatism, Skin Diseases, Gastro-intestinal and kidney troubles.

Hospital is completely equipped with Laboratories X-Ray and operating facilities.

Special attention to surgical cases.

G. A. Townsend, D. O., M.D. Surgeon-in-Chief Emigrant, Montana, Post Office

## The Joys That Await You at Los Angeles

It is the desire and hope that every member of the AOA will splash onto the horizon of the future an unreserved resolution, a wanton illation, to verify the vagaries, and treat his visual and mental purple to a point of catalepsy anent the much vaunted glories and splendors of California, by attending the 26th annual AOA meeting in Los Angeles; all of which is to betide July 3rd to 8th. The meeting of the honest and honorable society of O. & O. L. is to be held the week following.

The program committee is prodding our eminent high-brows to prepare their best, and in addition are beating the bushes for little fellows with big and pregnant ideas—all with signal promise of facile delivery.

We understand that the different Entertainment Committees lie (like good Californians) awake day and night with their thinktanks in incubators; and are already assuring us of entertainment and service magnificent in comparison

They promise to take us to their mountain tops and into their caves and cellars; they offer to take us onto and into their (sic) ocean with or without our bathing suits; take us to the world-famed Catalina Islands, en route to see the submarine gardens through glass-bottomed dorys and masoolas; they invite us to judge their target practice; they invite us to a real old-fashioned Spanish barbecue, (also to hear them eat); to dive about and probe their harbor; they offer to show us the outside of the inside of Hollywood; suffer us to pick their oranges and ripe olives, and incidentally may slip us a lemon; take us over their oil fields, We shall be (which also lie in California). provided with a stippled "loomnum lavilleah," so that we may be found again should we get lost in the maze so enthusiastically promised by the halo-wearing D.O.'s of the City of Angels. Let's Go.

The Santa Fe railway has been chosen the official route, with *Special Train* leaving Chicago, Ill., 8:00 p. m., June 26th, Kansas City 11:30 a. m., the 27th, Albuquerque 4:35 the 29th, and one day, the 30th, at Grand Canyon; arrive Los Angeles 6:00 p. m., July 1st. Make your reservations now, with the Transportation Committee of your state, preferably over official line.

Write Mr. J. R. Moriarty, Division Passenger Agent, Santa Fe Ry., 179 West Jackson Street. Chicago, Ill., for descriptive circular of this trip. It is a "dandy."

Again, I say, make your reservations early.– J. M. Fraser, D.O., General Chairman, Transportation Committee, Evanston, Ill.

## Stop Treating-Start Curing

When more members of our Profession stop treating and start curing their patients, then will our profession catch up to the Law of Osteopathy—P. R. Hubbell, D.O., Detroit, Mich.



Thumb Rock, Columbia Highway



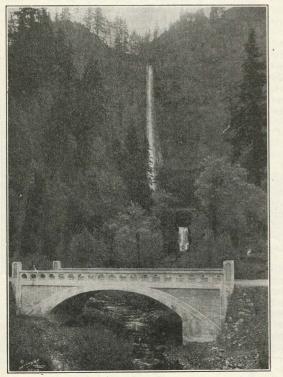
Shepperd's Dell Bridge





Waukeena Falls

Latonville Falls



Multnomah Falls, Columbia River Highway



Wizard Island, Crater Lake, Medford, Oregon

"The Oregon Societies and the Western Association invite the Osteopathic Profession to stop at 'Crater Lake' for a 'dip'; drive in by the 'Columbia Highway'; cross 'Shepperd's Dell Bridge'; view beautiful 'Waukeena' and 'Latonville Falls' and get a 'stop-over' at the 'Gateway of the North, Portland," says Dr. C. H. Beaumont, Pub. Chairman of Oregon Osteopathic Association. Atta Boy!!—Distributed by T. J. Ruddy, D.O., W.O.4 Publicity Director.

## AOA Convention, Los Angeles, Week of July 3rd

# BUILDING SUCCESS in PRACTICE

## [Ready to Print in Your Home Newspaper] What Encyclopedia Britannica Says About Osteopathy

It has surprised many persons that more def-nite and intelligent explanations of Osteopathy have not found their way into the dictionaries and cyclopedias of the English language. After a system of healing has made such a place for itself that it has rewritten the laws regulating medical practice in nearly every state in the Union as Osteopathy has done, it is strange indeed that any reference book could fail to explain the tenets of such system adequately. Yet, until now, the Encyclopedia Britannica has not been properly fortified in this direction.

The new volumes of the American edition of the Encyclopedia Britannica, just off the press, make up for this oversight, however, and on tain a full lucid definition and explanation of Osteopathy. This article was written by Dr. George W. Riley of New York City. By special permission of the American Editors, this whole article is reprinted in the June issue of "Osteopathic Health," the monthly journal devoted to the new and better ways to rebuild health.

In this issue there is also found an entertaining story of the great benefit concert which Mme. Galli-Curci, the immortal colorature soprano, gave at the Metropolitan Opera House in New York as a benefit for the New York Osteopathic Clinic and the Osteopathic Hospital Fund.

Viscount Deerhurst, of London, also contri-butes an interesting bit of information about the great strides which Osteopathy has made into British favor. The Viscount explains that he was rendered lame by war service in France and all the best physicians and surgeons of England failed to benefit him until he was suddenly and completely cured by osteopathic adjustments. Since then he has been a great booster for the new American healing science among influential people in England.

You may obtain this June issue of "Osteopathic Health" free upon making application

to Dr. of either in person or by telephone, or even a post card request will bring it to you without obliga-tion on your part. In fact, while you are about it, you can obtain this interesting little maga-All you need do is ask for it.

## Telling It to the Patient

"Don't fear, the cracks you hear are but simply one joint moving across the articular sur-face of another where before existed tension, false motion and general rigidity. Dr. Still, Founder of Osteopathy, told us to fix it and leave it alone. The all important thing is the result of normal adjustment of joints .-- John H. Finley, D.O., Syracuse, N. Y.

## Avoid High Sounding Technical Terms

Did you ever notice how much more interest your patients take in their case and in Oste-opathy as a healing agency when you explain it to them in plain simple language that they can understand? High sounding technical terms may be all right in some places, but the average layman does not understand, and loses interest.—H. M. Cobb, D.O., Hugo, Colo.

## Keep to Osteopathy

Don't knock our imitators, to knock is to bost. Show how thorough a preparation we boost. make. Let the inquirer draw conclusions. I tell my patients what I am doing and the remake. sults I expect and why. Educational standard is all right. We should not try to dose with drugs, we are only, the best of us, partly "baked" in drug therapy. Keep to the principles that Osteopathy was builded on, and you know and I know it was not drugs .- W. T. Thomas, D.O., Tacoma, Wash.

The Encyc	opedia Britannica's Defini of Osteopathy	tion
Successful Prophylax Tissue Adjustment; Nose and Throat Spee Profession Maintains Galli-Curci Gives Ben Mme. Galli-Curci Things. Healing Wi What Osteopathy	ase Origins; Added the Lesion to Disea is for Childhood's Ills; Osteopathic Tre Nature's Effort Is Toward Recovery; ialists; Dr. A. T. Still Was a U. S. Army Seven College; Various Societies and In <b>nefit Concert for the New York Osteopa</b> Pays All the Bills; How Mme. Galli-C <b>hout Drugs Is Popular in Great Brita</b> i [s; Sigh Out of Sciatica! A London C ed the Viscount's Lameness; Nature's W	eatment Is Eye, Ear, 7 Surgeon; nstitutions. thic Clinic Curci Does in Osteopathic
	tle contents of "Osteopathic Health" for agazine will be mailed free of charge o	
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# THE JUNE ISSUE

## What the Encyclopedia **Britannica Does Say** of Osteopathy

That's the piece de resistance of the June issue of "Osteopathic Health." Nine pages. Fine. It's authoritative and will make good directto-the-home publicity for the science in general and for vour practice in particular.

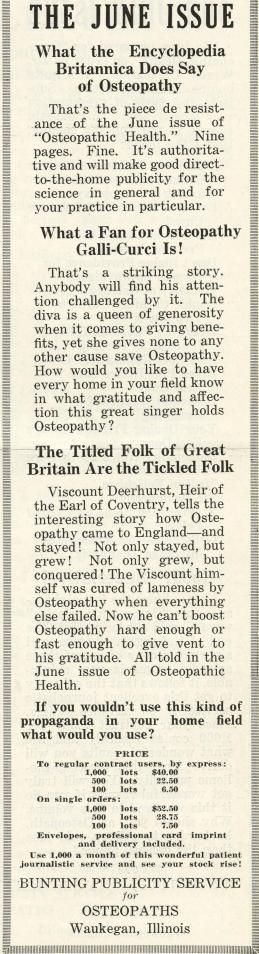
## What a Fan for Osteopathy Galli-Curci Is!

That's a striking story. Anybody will find his attention challenged by it. The diva is a queen of generosity when it comes to giving benefits, yet she gives none to any other cause save Osteopathy. How would you like to have every home in your field know in what gratitude and affection this great singer holds Osteopathy?

## The Titled Folk of Great **Britain Are the Tickled Folk**

Viscount Deerhurst, Heir of the Earl of Coventry, tells the interesting story how Osteopathy came to England-and stayed! Not only stayed, but grew! Not only grew, but conquered! The Viscount himself was cured of lameness by Osteopathy when everything else failed. Now he can't boost Osteopathy hard enough or fast enough to give vent to his gratitude. All told in the June issue of Osteopathic Health.

If you wouldn't use this kind of propaganda in your home field what would you use?



"Where There Is No Vision the People Perish"

# **OUR JULY ISSUE**

Has been prepared for "Osteopathic Health" on order by Dr. Wesley C. Warner. It's quite unique. Nothing better. Subjects and mode of presentation very largely new. This bulletin is just to tell you it's coming. Here's the menu:

**High Blood Pressure a Modern Disease of Americans** Warding Off Apoplexy

**Extreme High Blood Pressure** Cured

**Diabetis and High Blood Pressure Vanish** 

Don't Blame Providence for **Human Improvidence** 

Economy of Osteopathy

**Double Cataract Cured in** 

Two Ways

Drugging Shortens Life-**Osteopathy Prolongs Life** 

How Soft Goiters Are Cured

**Bread Pills Better Than Real Ones** 

- Digestion Weakened by Drugging
- Your Doping Friends Always **Feel Dopey**

Osteopathy Not a Faith Cure Folk Prejudice

**Medical Fetichism** 

**Tic Douloureux** 

A Wrenched Spine and Tilted

Pelvis Gallstones—An Example of

**Mistaken Diagnosis** 

## **Good?** Superlative!

Note: Since the last eight is-sues of "Osteopathic Health" were all sold out long before the end of the month of issue, and since not a copy of one of these splendid issues is now obtainable, it follows that the only way to get this excellent journalistic service is on advance orders. Place your contract today for 1,000 copies monthly and see what wonderful results you will derive from this direct-to-thehome publicity. You will truly get wonderful results if you do it this way and in this volume. Why should you, an Osteopath. be harder to sell on this idea than the general public?

## The

BUNTING PUBLICITY SERVICE for

OSTEOPATHS

Waukegan, Illinois 

## Most Powerful and Economical Advertising Never Adequately Used by the Profession

Direct Advertising-the distribution direct to homes of such literature as "Osteopathic Health" and "Harvest Leaflets"—is both power-Health" and "Harvest Leaflets"—is both power-ful and economical. It has always been avail-able to the profession, yet it has never been ad-equately used. Only a comparative few have maintained regularly distributions of liberal quantities. It has always paid these Oste-opaths well. No failures are recorded where such advertising has been done on a scale suf-ficient to win results ficient to win results. What might easily be done by the profession

in direct advertising will be realized when it is stated that a "reader circulation" of 15,000,-000 monthly could be obtained if 3,000 Oste-opaths would each distribute 1,000 copies of Osteopathic Health monthly: 3,000,000 homes would be reached and, as it is estimated (in accordance with usual method of calculation) that in each home each copy would have, on the average, five readers, the total "reader cir-

culation" per month would be 15,000,000. Think of it! 15,000,000 persons reading something about Osteopathy each month! Would such advertising create favorable in-fluence? Would it be worth while? Most assuredly, yes. Who can doubt it? It can be made an actuality if the profession

wants such advertising earnestly enough. The part of each individual is simple: Just send Just send your order for the 1,000 monthly "OH" mailing list plan.

The Bunting Publicity Service for Osteopaths will do the rest.

Do you want Osteopathy explained to 15,000,-000 readers monthly? If so, do your share; use 1,000 "OH" monthly and urge others to do like-Keep the agitation going until at least wise. 3,000 Osteopaths are circulating 1,000 a month each. Then these aggregated co-ordinaing distributions will represent one great Nationwide osteopathic direct-to-the-home advertising campaign, reaching 15,000,000 persons monthly. Let it be done! Why not?

## Short Lecture for New Patients

Every new patient means a lecture on Oste-opathy. I show a chart of comparative spines. what is meant by various lesions, Explain pinched nerves, etc. The result of same. Then make as plain as possible what corrective treatment does .- Daisy D. Rieger, D.O., Billings, Mont.

## **Educates** While Treating

I talk to my patients first about their own case. Have they followed instructions? I in-quire as to results of last treatment, etc. After their own personal case is well taken care of I then talk to them about Osteopathy, about its institutions, about its hospitals, about its organizations, about our research workers and what they are doing, about their successes and their failures, their wants and needs, about our publications, our clinics, our colleges and courses of instruction-comparing Osteopathy with its competitors and imitators.-Albert U. Jorris, D.O., LaCrosse, Wis.

## Gain Patients' Confidence

The first thing to do in practice is to establish confidence with your patients. Diagnose their case. Do specific work and explain with each effect it should have on the condition in ques-Branching out further in your conversation. tion, if certain things should come up or certain conditions follow this particular trouble, teach your patients how ably you can handle the situation.—T. W. Posey, D.O., Bowling Green, Kentucky.

## Near Osteopaths the Real Menace

The Chiropractor who is a quack Osteopath is the one grave menace to Osteopathy as a profession. He preaches our doctrines. He bids for the anti-drug sentiment. He takes the wind out of our sails. He is a wonderful ad-vertiser. He out numbers us. We must meet his advertising propaganda or go under. For college he attends a school of advertising.-Geo. A. Kerr, D.O., Benton, Ill.

## System Wins

Work by appointment. Make them. Keep them. Make all charges. Give due credits Work by a system, don't worry.—E. H. Cosner, D.O., Dayton, Ohio.

## Current Issue of "Osteopathic Health" on Sale

## JUNE

"The Encyclopedia Britannica's Definition of Osteopathy." Price, 100 copies, on contract \$6.50, single orders, \$7.50, delivered.

GET LOWER PRICES BY QUANTITY BUYING! On annual contract orders delivered by express 500 copies cost \$22.50; all quantities above 600 at \$4. per hundred.

On single orders delivered by express 500 copies cost \$28.75; all quantities above 600 at \$5.25 per hundred.

Envelopes with every order.

Professional card plate free to contractors.

October issue	Sold Out!			
November issue	Sold Out!			
December issue	Sold Out!			
January issue	Sold Out!			
February issue	Sold Out!			
March issue	Sold Out!			
April issue	Sold Out!			
May issue	Sold Out!			

## Quantity Prices—Osteopathic Health

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opies Mailed to Your List on Annual Contract
For 1000 copies per month\$55.00 per month
For 750 copies per month 41.25 per month
For 500 copies per month 30.00 ped month
For 300 copies per month 20.25 per month
For 100 copies per month 8.00 per month
sulk Shipment by Express on Annual Contract
For 1000 copies per month\$40.00 per month
For 750 copies per month 30.00 per month
For 500 copies per month 22.50 per month
For 300 copies per month 15.75 per month
For 100 copies per month 6.50 per month
Copies Mailed to your List-One Time Order
For 1000 copies\$67.50
For 750 copies 50.75
For 500 copies
For 300 copies
For 100 copies 9.00
Bulk Shipment by Express—One Time Order
For 1000 copies\$52.50
For 750 copies
For 500 copies
For 300 copies 18.75
For         500 copies         28.75           For         300 copies         18.75           For         100 copies         7.50

Professional card plate free to contractors. All prices are for magazines with or without profes-sional card imprint. Prices on express shipments include transportation. Charges are prepaid. Manille envelopes supplied free. Superior quality white envelopes furnished instead, on request, at 25 cents per hundred extra.

## "Harvest Leaflets" Have a Potency All Their Own

It is the supreme merit of our line of 50 different "Harvest Leaflets," ranging from one to 16 pages each, that they are the easiest, quickest and cheapest advertising media of high quality that one can put out to special mailing lists. The cost per thousand persons reached is so low that any practitioner really interested in building up practice or osteopathic prestige in his own field can afford to mail these out in series every week or ten days. The results from using them are found to be so good that any vigorous campaign of this sort, entered into for a period of three to six months, ordinarily pays for itself from new patients obtained before the campaign has entered well into the second month.

The proper strategy involved in the use of "Harvest Leaflets" is to regard them as the low-cost, wide-distribution, quickly-repeating medium for attracting first attention and producing inquiries. All inquiries so produced should at once be put on one's regular mailing list for education by Osteopathic Health and selected numbers of our "Standard Laity Bro-chures." It is usually an easy matter to find out what an inquirer's special interest in osteopathy may be-that is, what and whose disease it is hoped to cure-and then it is only commonsense follow-up science to select and supply such brochures as most nearly cover that subject.

Any one who wants quick and extensive re-sults will be pleased at the productiveness of this system of advertising. And the charm of it is that it benefits osteopathy as a whole by benefitting most the osteopath who puts this evengelization machinery in motion. In other words, the fellow who spends the money gets it back with a profit besides. That proves quite satisfactory, as a rule, to the one who shows the enterprise.

Don't Value Your Services Too Cheaply The cheap Osteopaths are still with us. We have one in Guthrie who in a display adver-tisement is offering 13 treatments for \$15.00 and 13 residence calls for \$24.00. Can any one better that for cheapness? The chiros charge more here and their ads are more dignified .-Ellen Shultz, D.O., Guthrie, Okla.

## Health Buckle Supplies a Long Felt Need

It is generally conceded that many of the ills common to men can be directly traced back to the wearing of tight belts. Elastic belts supposed to do away with the objectionable features of the ordinary belt come and go and the lowly suspenders remain its only rival. Boys, young men and such old men as look for style continue to set aside suspenders for the more stylish, though less healthful belt.

Dr. J. P. Gordon of Rockford, Illinois, an Osteopath, is placing on the market a Health Buckle Belt which, it is claimed, does away with all the objectionable features of the ordinary belt and the so-called elastic belts. By means of the Buckle Spring attachment wearer's body is left free in all its movements: ab-dominal expansion during respiration is permitted; development of tissue around the waist is not obstructed; the normal position of the ntestines remains unchanged; in a word, the Health Buckle Belt combines style with real To see the belt is to want one. utility. Doctors will surely want to recommend it to their men patients. The prices are reasonable and your satisfaction is guaranteed or your money will be refunded. Health Buckle springs come nickel, silver and gold plated.

A kick against fate is often but an apology for laziness.

# HARVEST LEAFLETS

## For Broadcast Sowing Your Field of Practice at Minimum Cost!

You Should Use them by the Thousand on a Ten-Day Mailing Schedule. Nothing else is so productive for cross-sowing between issues of "Osteopathic Health.'

They're the ideal medium to use as "First Attention Getters" and "Inquiry Makers" if used by the thousand on a follow up. Those who think advertising doesn't pull haven't bought enough of it to get any pull. If you don't buy enough to yield measurable results you haven't advertised— you've only tasted a sample for the flavor.

Enter Every Former Patient and Inquirer whose address you have on our 10-Day Follow Up to get the whole series! Then you won't debate whether Bunting advertising pays or not.

## **1-Page Harvest Leaflets**

- 18. 19. 20.
- 21.
- Habit in Suffering. The Osteopath's Point of View. An Osteopath The Nine Modern Wonders. Osteopathy Is Not a Remedy. Dr. Atzen's Definition of Osteopathy. Pain. 22. 23. 26.
- Insomnia.
- 27. 29.

Sciatica. 38. Price, in 1,000 lots, \$5.00, with no extra charge for imprinting professional card. In less than 1,000 lots the price is 75 cents per hundred pamphlets, with extra charge of \$1.00 if your pro-fessional card is imprinted on any number from 100 to 900

## **4-Page Harvest Leaflets** No. 28. 40.

- What Doctor Shail I Employ? Disease Caused by Mechanical Pressure. How Osteopathic Patients are Treated. Getting Well All Over at the Same 'Time. Building Up Weak Throats. A Chiropractor at Work.
- 1. 2. 3.

- 4. 5. 6.

No.
28. The Best Spring Tonic.
40. Did You Know This About Osteopathy.
41. Brain Diseases from Birth Injuries.
42. Osteopathy for Automobile Accident Cases.
43. Medical Art and Then Some in Obstetrics.
44. The Error of Drugging. Price, in 1,000 lots, \$10.00 with no extra charge for imprinting professional card. In less than 1,000 lots the price is \$1.25 per hundred pamphlets with extra charge of \$1.00 if your professional card is imprinted.

## **6-Page Harvest Leaflets**

- What Is Osteopathy? A Word to Former Patients. What Osteopathic Fingers Will Do. Neuritis From a Slipped Rib. Chiropractic Kleptomania.
- No. 7. 8. 9.

An Explanation of Osteopathy. (As stated by the London Times.)
 Why the Spine Is the Basis of Health.
 What Osteopathy Does for Women.

No.
24. Neuralgia and Headaches.
25. Adjustment the Basic Principle of Osteopathy
46. Osteopathic Procedure in the Chronic and Acuta Diseases.

Chiropractic Kleptomania.
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## N D.O. LAND

Twenty-Third Annual Convention of P.O.A. The 23rd Annual Convention of the Pennsylvania Osteopathic Association will be held May 26 and 27 at the Hotel Bellevue-Stratford, Philadelphia, Pa.— E. Clair Jones, D.O., President.

## **Opportunity in Greenwood, Mississippi**

Here's a good chance for some young man who wants to go South. A location in Greenwood, Mis-sissippi, a delightful southern town. Practice largely rural. Young man with laboratory experience can have things his own way.

## Indiana Osteopath New Rotary Chief

At the annual osceptin New Rotary Chief At the annual meeting of the Board of Directors of the Frankfort Rotary Club, on April 5th, Dr. Clair V. Fulham, D.O., who has served the club so ably for several years as secretary was elected to the presidency for the coming year, succeeding Clar-ence Spencer.

Memphis, Tenn. Osteopathic Association Elections The following were elected officers of the Memphis Osteopathic Society at a recent meeting: Dr. C. L. Baker, president; Dr. F. H. Butin, vice-president; Dr. C. N. Brackett, secretary and Dr. H. C. Cupp, treasurer. Arrangements were completed for enter-taining the visitors to the 24th annual convention of the Tennessee Osteopathic Association, which will be held here May 19 and 20.

Southeast Missouri Osteopathic Association Meeting Southeast Missouri Osteopathic Association Meeting The Southeast Missouri Osteopathie Association held its semi-annual meeting at Poplar Bluff, Mo., April 11th and 12th. The meeting was a decided success, Dr. H. S. Hain from Kirksville, Mo., per-formed a number of orthopedic operations, the most difficult one being a double congenital club foot. The next meeting will be held in Farmington, Mo., Octo-ber 11th and 12th.—Anita E. Bohnsack, D.O., Secy.

## Seattle Locals

Seattle Locals Seattle has two Osteopathic Associations, and every Osteopath here belongs to both. The King County Osteopathic Association, and the seattle Osteopathic Efficiency Club, each meets once a month. At the March King County Osteopathic Assn. Dr. James T. Slaughter gave a most comprehensive discussion of pregnancy; Dr. Lydia Merrifield pre-sented "Operative Cases and Their Hospital Care"; Current Therapeutic events were discussed by Dr. Martin D. Young. \* \* \*

At the March Efficiency Club meeting, Dr. T. Oren Watson, presented the causes of "Abnormal Condi-tions of the Colon and Rectum," while Dr. James H. Moore, read a paper discussing Local and Ori-ficial treatment of these diseases. Dr. Leonora Grant demonstrated osteopathic technique for the correction of Lumbar and Sacral lesions.—Roberta Wimer-Ford, D.O., Cor.-Secy.

Warren, Ohio, Sees End of Successful Essay Contest

warren, Ohio, Sees End of Successful Essay Contest The Osteopaths of Warren, Ohio, put on a prize essay contest among students of the High School which proved very successful. Five prizes were awarded: first price \$20; second prize \$15.00; third rize \$7.50; fourth prize \$5.00; fifth prize \$2.50. Lots of favorable publicity for Osteopathy resulted from this contest. The Warren Daily Chronicle published first prize essay in full. We hope to send some of these pupils to some of our colleges.—J. F. Reid, D.O., Warren, Ohio.

Dr. Vincent O'Rourke Cures a Case of Poliomyelitis The April 14th issue of The Register-Democrat of Portage, Wisconsin, printed a halftone picture of Dr. Vincent O'Rourke, Osteopathic Physician, whose treatments brought remarkable results in the case of one Ray Dunning, suffering from complete par-alysis in both arms and limbs, and unable to sit up or walk. The patient was taken sick on Thanks-giving and now after treatment by Dr. O'Rourke can walk about without the aid of crutches and without any signs of deformity.

## Free Clinic in Southwest Missouri

Free Clinic in Southwest Missouri The Southwest Missouri Osteopathic Association is now conducting a free clinic for children under twelve in the three principal cities of Jasper County —Webb City, Joplin and Carthage. The Webb City cases are taken care of between 8 and 9 a. m. every Monday and Thursday in the offices of Dr. M. Slaughter and Dr. N. P. McKey; the Joplin cases requiring hospital care go to the Jane Chinn Hos-pital in Webb City, as Osteopaths have been refused admission in St. John's Hospital; Carthage clinics will be held on Mondays and Thursdays, the same day as at Joplin, between 8 and 9 a. m. and all hospital cases are taken to the Carthage hospital.

## **Cleveland Osteopathic Association Meeting**

The regular meeting date of the Greater Cleveland Osteopathic Society was advanced from May 1st to April 27th, in order that the members might be privileged to hear a talk by Dr. Robert H. Nichols of Boston on clinical diagnosis. The meeting was a very enthusiastic one as seven of the Cleveland Oste-

opaths had just completed Dr. Nichols' special course at the Delaware Springs Sanitarium and had praised the man and his work to the skies. Dr. Singleton stated that the lecture on constipation was alone worth a thousand dollars to him and especially asked Dr. Nichols to include it in his talk. Arrange-ments are being made to have Dr. Nichols give his course in Cleveland at the Roscoce Osteopathic Clinic sometime in August of this year.—J. W. Keckler, D.O., Chairman of Program Committee.

## Kansas City Osteopaths Plan Hospital

Kansas City Osteopaths Plan Hospital The Osteopathic Physicians of Kansas City were properly and profitably entertained at a noon-day luncheon, on March 30th. Dr. C. C. Reid of Denver, Colo., gave a very interesting and instructive talk on hospitals, their needs, management, etc. The recent action of Grace Hospital in excluding Oste-opaths, that being the only one to which Osteopaths could take their patients, in Kansas City, has ne-cessitated a plan to build a hospital in the very near future. At the meeting, Dr. L. S. Larimore 

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was elected temporary chairman of a Hospital Com-mittee to go into plans of raising funds, etc. At this writing there is nothing definite to report but we vouchsafe the live bunch in Kansas City will announce definite plans for a hospital in the very near future.

## Chiropodists Hear Dr. Frank J. Stewart

Chiropodists Hear Dr. Frank J. Stewart The Chicago Branch of the Illinois Pedic Associa-tion (Chiropodists) meets twice a month. The speaker at both the April meetings was Dr. Frank J. Stewart who spoke on "Social Hygiene," dwelling especially upon venereal infection innocently acquired. "Gonorheal vulvoraginitis," he said, "occurs in epi-demics among little girls sometimes, and the readi-placed in a hospital ward with a large number of nuinfected little girls may start an epidemic among them that will sweep the entire ward." Dr. Stewart further said that an examination of expectant

## Dr. Franklin Fiske

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mothers—all private room patients—in one of the large hospitals in Chicago, the survey continuing over a considerable period of time, showed that four percent of them were syphilitic. Ten percent of the clinic patients also showed a positive Wasserman.

## "Right on His Feet" Is Dr. Boyd

"Right on His Feet" Is Dr. Boyd Dr. Nathaniel W. Boyd of Germantown, Phila, Pa, is ever wide awake and right on the job when it presents itself whereby his chosen profession and word here, correcting wrong impressions there-everywhere and at all times giving unmistakable hive", Germantown's monthly, carries Dr. Boyd's figular osteopathic advertising; in the same pub-him; the Philadelphia dailies, too, receive and print inely letters of his; clippings from all kinds of newspapers and periodicals are noted by him and rest of the profession might "get in on" the inter-seting bits of news that come up from time to time, freally busy ever have time to do anything." The Profession could very well stand more men of the Profession could very well stand more men of

Dr. Frank C. Jones of Los Angeles Passes Away March 20th marked the death of Dr. Frank C. Jones of Los Angeles, California. Dr. Jones was born in Rockford, Illinois, in 1857 and in 1880 grad-uated from the Medical School of the University of Michigan. In 1882 he was married to Miss Emma Maddick of Panora, Iowa, who later on was asso-ciated with him in practice for a number of years. Dr. Jones was elected to membership in the Des Moines Still College of Osteopathy, and successfully practiced Osteopathy in Panora, Herndon and Des Moines, Iowa, and since 1912 in Los Angeles. The first four years of his stay in Los Angeles he was a member of the Faculty of the Pacific College of Osteopathy, which college awarded him a badge of osteopathy, which college awarded him a badge of typhoid, having lost only one case out of 1187. During the flu epidemic Dr. Jones treated hundreds of cases without the loss of a single patient. Sur-viving are: Dr. Emma Jones, beloved wife and W. R. Jones of Sunnyside, Washington, an only son. Dr. Jones leaves a host of friends all over the country who knew him as a staunch and loyal friend and a kind and devoted physiclan.

## Chicago College of Osteopathy

Chicago College of Osteopathy The Annual Doctorate Address before the members of the graduating class of the Chicago College of Osteopathy will be delivered this year by Rev. Joshua Stansfield, D.D., at the Hyde Park Metho-dist Episcopal Church, corner 54th Street and Black-stone Avenue, Chicago, at 7:30 p. m., Sunday, May 28. The Commencement exercises will be held at 8 p. m., Thursday, June 1st, at the Hyde Park Pres-byterian Church, corner of 53rd Street and Black-stone Avenue, Chicago. The Commencement address will be delivered by Dr. C. B. Atzen, of Omaha, Nebraska, whose subject will be "Service." Members of the class of 1922 are: Forest Raymond Adams; Lauren Arthur Anderson; Vernon Record Carlisle; Lee Riley Catron; Elvin Lewis Clark; Jean Baptiste Claverie; LeRoy Coombs, B.A.; Hubert Miller Eckerson; Harold Evers; Anne M. Fielding, R. N.; Preston Bonar Gandy; Christian Bernare, Meyn Belding Hasbrouck; Helen Frances Hull; Bessie Belle Johnson, Ph.B.; Paul Edward Knecht;

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Dr. Percy Evan Roscoe Osteopath 410-413 Seventy-first-Euclid Bldg. 7016 Euclid Ave., Cleveland, Ohio

Dr. C. Burton Stevens Obstetrics Chief of Obstetrical Department Osteopathic Hospital 617-18 Farwell Bldg. Detroit, Mich.

Dr. T. J. Ruddy Eye, Ear, Nose and Throat Originator (Bowling) of "Finger Method" for Hay Fever and Catarrhal Deafness, etc. Chief of E. E., N. & T. Dept., C. O. P. & S. 302-9 Black Building Los Angeles, Calif.

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> Dr. Jerome M. Watters Osteopathic Physician Ear, Nose, Throat and Eye 2 Lombardy St., Newark, N. J.

M. D. K. Bremner, D.D.S. Radiography, Oral Diagnosis and Pyorrhea Suite 1600, Mallers Building, 5 S. Wabash Ave. Chicago, Ill.

Dr. Leland S. Larimore Eye, Ear, Nose and Throat Prof. Opthalmology, Optometry and Oto-Laryngology, K. C. College of Osteo-pathy and Surgery 601-2-3 New Ridge Bldg., Kansas City, Mo.

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## Stop at Grand Junction, Colorado

Stop at Grand Junction, Colorado The famous Rocky Mountain Conference will be help this year at Grand Junction, Colorado, begin year of the second stop of the Western Slope. To make osteopaths going to Los Angeles to stop a few days in the metropolis of the Western Slope. To make year of the metropolis of the Western Slope. To make the metropolis of the Western Slope. To make be present eminent technicians, and we urge the pro-benotis patients for operative care. There will also be present eminent technicians, and we urge the pro-benotis patients for operative care. They will be present eminent technicians, and we urge the pro-benotis patients for operative care. They will be present eminent technicians, and we urge the pro-benotis by some of our best experts. If you are wents by some of our best experts. If you fail when the best of the best is the pro-benotis by some of the best men in our profession. A registration fee of \$5.00 only will be charged al the belonging to the Colorado Association. Yery bounds of the world. The Monument Park is fail of belonging to the best expenses may be charged in the best by some of the best in Grand Mt. affords proving due to make reservating be attended to the top of the due the pro-to belonging to the world. The Monument Park is fail of the world over. The top of Grand Mt. affords proving the world over the top of the due to the top of the due top of the due to the top of the due to the top of the due to the top of the due top

## Illinois Osteopathic Association Meeting

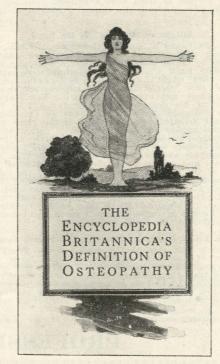
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Dr. J. J. McCormack of Sheboygan. Wisconsin, is ow located in the York Building, 718 New York now

now located in the York Building, 718 New York Avenue. Dr. Charlotte L. Claypoole of Columbus, Ohio, re-cently enjoyed a two weeks post graduate course at Delaware, Ohio, under Dr. Robert Nichols of Boston. Dr. W. Luther Holt announces the removal of his offices from the Ferguson Building to Suite 1221-23-25 Loew's State Building, Seventh and Broadway, Los Angeles, California. Dr. J. M. Ogle has removed his office from the Empire Block, 803 Main St., to the K. of P. Bldg., No. 8 Gordon St., Moncton, N. B., where he has in-stalled a modern X-ray Laboratory. Also he is pre-pared to diagnose by the Electronic Reactions of Abrams and give Oscilloclastic Treatments.

## **Osteopathic Health for June**



This issue also contains story of Mme. Galli-Curci's concert for Osteopathy in New York City and article by Viscount Deerhurst on Osteopathy in Great Britain. A wonderful combination of testi-mony to the prominence won by Osteopathy in high places. For the increase of your own prestige be sure to use this magazine. The facts and informa-tion given are impressive testimony to the scientific authority and therapeutic efficacy of Osteopathy. Remember it's a case of order promptly if you wish to be supplied.

Dr. William E. Crawbuck of Mammoth Hot Springs, Yellowstone Park, Wyoming, who recently underwent an operation for the removal of a badly infected appendix at the Chico Hot Springs Hospital, Emigrant, Montana, is making an excellent and un-eventful recovery and will soon be able to resume his practice. Dr. George A. Townsend assisted by Dr. Roy M. Wolf, performed the operation.

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To Drs. E. Paul Erwin and Minnie B. Erwin, a daughter, Eleanor Elizabeth, on April 17. To Dr. and Mrs. R. E. Curry of Sycamore, Illinois, a seven pound baby girl on May 4th, Joan Louisa. To Dr. and Mrs. J. H. Grise of Watertown, Wis-consin, a 6 pound, 14 ounce son, John Francis, on April 25th.



Dr. F. C. Jones of Los Angeles, California, March 20th, age 65. Dr. A. H. Benefiel of Spokane, Washington, April 11th, of pneumonia. Dr. Benefiel for a long time took an active part in the scientific department of the Spokane City Schools. He is survived by Dr. Carrie A. Benefiel and a daughter, Grace.

# EXCHANGE and MARKET

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