

# **Osteopathic Truth**

**October 1918**

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# Osteopathic Truth

A MONTHLY MAGAZINE FOR THE OSTEOPATHIC PROFESSION

Pledged to the TRUTH which Father Andrew saw,  
No favor sways us, and no fear shall awe.

Volume III

OCTOBER, 1918

Number 3

## Dr. A. T. Still, Master of Man

William Alexander Leighton  
900 Montrose Ave., Chicago

The writer of this article is a Scotchman, who, after studying law at Edinburgh University, came to this country some ten years ago. Mr. Leighton has gone in for commercial pursuits and knows that methods are unimportant, that what counts today in the business world is results, and his analysis of the claims of Osteopathy seems to justify our belief that he will secure results in his own business if it means the discarding of every pet idea of the past.—Editor.

I recently read a statement to the effect that the concern headed by a man of initiative is always one jump ahead of its competitor, headed by an imitator. This is singularly true of doctors. "Where there is no vision, the people perish," says the Sacred Book, and Christ himself was the greatest exponent of initiative the world has ever seen. What John H. Patterson was to the Cash Register, what the Remingtons and the Underwoods were to the Typewriter, what Westinghouse was to railroad travel, what Morse and Bell and Edison have been to electricity, Dr. A. T. Still, the founder of Osteopathy, has been to the human machine. He had the same tenacity to his belief in the adjustment of the human body that has made the Wright Brothers name famous the world over by their belief in overcoming the obstacles of the air. He—Dr. Still—knew the human body, understood its whole mechanism, and by the mastery of his business plus dogged determination, he evolved a natural remedy for diseased functions of the human body. He realized that when something went wrong with the human body, the place to look for the trouble was not in the pharmacopoeia but in the machine itself. And so Osteopaths the world over are teaching people that when something goes wrong with the human machine, the place to look for the trouble is in the mechanical viewpoint of human physiology, just as when something goes wrong with your automobile, you or your mechanic at the garage, look for some small part that needs adjustment, rather than to attempt to

remedy the trouble by putting pills in the gasoline tank.

Nations and corporations today are spending vast sums upon the origination of new workable schemes, upon the power to readjust successfully the old order to the new, to evolve order out of chaos caused by the world war. The power of initiative is not heaven-sent, it is largely the fruit of study, the exercise of imagination, the spirit of daring and clear thinking—in short, in knowing how. We have to recognize that we are living in a new age, an age when cant and hypocrisy and long prayers have been relegated to the dust heap in favor of clean living and an attitude of helpfulness to all, when one's own salvation is less sought for by the sincere than the spread of the brotherhood of us all, when America has more to think of than her own prosperity and realizes her very existence is dependent upon her interest in other and weaker nations, when we are grappling with new conditions, new methods, new processes and blazing new trails. It is hard to throw off the shackles of precedent, to cast loose from the chains of custom. But the very fact that most progressive M.D.'s are adopting into their practice the methods and fundamental principles of Osteopathy is a recognition by them that the old order is changing, that it is better to be a leader of the new order than a follower of the obsolete and inefficient methods of the past.

When we operate a factory by steam and the production is insufficient we install electricity, scrapping into the waste heap all the old plant and we say that electricity is a success in industrial life, why? Because electricity produces the goods. In curing drunkards and in regenerating men, we try so-called cures, to find men slipping back, we try will-power to find men of strong character overcome again by momentary forgetfulness, and we go down to the workers of the slums and

find real men who have been regenerated and restored to a useful position in society by the power of Christ. And we say we cannot account for electricity or the power of religion in exact terms, but we do say we can see the results and we gauge the success of anything by its results. We may not know the human machine in all its intricacies, but we do know that an all-wise providence has created every part of it for harmonious adjustment with the other, and we are seeing in the light of Osteopathy that when something goes wrong with us, we need more than a lubricant, we need an examination of the machine which is to carry us through life, and we need to have our bodies adjusted so as to work for the biggest results. What results has Osteopathy achieved? All of us who keep up with the times know of thousands of cases given up by ordinary medical practitioners as incurable where the lame have cast aside their crutches, the sick have leaped for joy, the bed-ridden have literally taken up their beds and walked, and we know furthermore that these transformations are permanent and enduring. We who study Osteopathy know that when we have been treated by one who knows his business we will step proudly along life's highway with confidence in the perfect adjustment of all our physical powers. We will not be like a car which some garage man has handed out to us, all slicked up, newly painted and enameled, and attractive looking, only to back-fire and stop when we put it to the test, but we will be like a machine that has had the thorough overhauling of an expert and which we can take out into the country with perfect confidence that the looking over and adjustment which our car has had from a trained and perfect mechanic will ensure our riding smoothly and comfortably and reaching our journey's end without the rattling and strain and trouble, which an out-of-adjustment car

always gives its driver. We are the drivers of our human body. Do we want to go along smoothly with the least possible wasting and jarring of our parts? If so, let us get our bodies adjusted from time to time by one who specializes in the human machine's adjustment, and who will take the responsibility for its wise regulation.

The rivers of life and business are swiftly changing their courses, and we who would reach our goals must not follow past methods or walk over for-

saken pathways. Are we to be so hide-bound by tradition that we will not welcome everything new in medical science, and among all the discoveries of this age, seek to know more of that wonderful science, Osteopathy, and what it has done, is doing and will do for mankind? If we are looking for result producers we will find them among the disciples of that great benefactor of humanity, Dr. A. T. Still, the founder of Osteopathy.

## O! Good Sense, Where Is Thy Sting?

By Andrew A. Gour, D. O., Chicago

In the first paragraph of "Discourse on Method," a book which, by the way, was the beginning of the modern school of philosophy, Descartes makes the very significant statement: "Good sense is better distributed than anything in the world; for each thinks himself so well provided therewith that, as a rule, even those who are most difficult to satisfy with regard to everything else, do not desire more of it than they already have."

In Canada, on Thursdays, some dentists made it a rule to pull two teeth for a quarter (*deux dents pour trente sous*), Canadian money at that. This was bargain day, as (*trente sous par dents*), a quarter per tooth, was the regular price on other days. The parsimonious French-Canadian, to get his money's worth, put off going to his dentist until Thursdays, when he had two teeth pulled for every quarter. It mattered not if one of the teeth was sound, two had to come out that a future ache might be spared.

It is amusing and seems incredible to us that such short-sightedness should prevail, still it is the truth. But how shall we speak of some of the monkey shines happening in our midst? If a patient comes, as they often do, with bad adhesions and general ptosis, and says, "I had my right fallopian tube removed about a year ago and, while the surgeon was working in the abdomen, he clipped off the appendix to save me future trouble and expense," should we laugh at such a statement? I usually do, but it always provokes a denunciation of the surgeon and an explanation of prevention by osteopathy.

What shall we say of a surgeon who is among the best known in the middle west, making three incisions into the abdomen of a young woman and, in order to cure her of hysteria, performs "four operations in one," as he explained to the young lady's family and as was later ex-

plained to me? That is, he removed the appendix, trimmed the gall bladder, the ovaries and the spleen. This occurred about two years ago and the patient, while under osteopathic treatment, had gained over five pounds and two X-ray examinations performed by Van Horn, about one month apart, had revealed every organ and abdominal function as absolutely normal. Her hysteria and nervousness were just about eradicated when, suddenly becoming alarmed at the danger of getting well and afraid of losing her chance to complain any longer, she "took on" with a loud crying spell and got me out of bed in the small hours of a cold morning. Over the phone, she said, "I'll show you whether or not I am still sick." This is how she wanted to establish her case,—by getting me out in the night. Because I refused to go to her, she and her family got "real mad" and they went to Prof. ———, who is as prominent in surgery as Dr. Murphy used to be. Prof. ——— offered them a bargain operation for which they fell and today the young lady is still alive,—oh, my, yes,—but, whereas she used to weigh 117 pounds she now weighs 67 pounds and has been in bed ever since her operation. So far as she is concerned the operation was successful. She is very sick and just has the time of her life complaining.

Should we be amused over such a case? Yet, wherein did this young lady and her family's logic surpass that of the French-Canadian's? And what shall we say of Prof. ———'s wonderful judgment in this case? One thing, however, a redeeming feature, is that both the Prof. and the family in question are German-Americans of the pre-war pro-Kaiser type and, before America entered the war to make the world safe for democracy (Osteopaths would be safer if they were all democrats or M. D.'s), the young lady and her entire family often expressed

sympathy for me because I am of French descent.

With a public as gullible as these examples represent, and a medical force as illogical and tyrannical as they have proven themselves in so many instances, and especially during the war, we might sit back, like Voltaire toward Popism, or, the old Greek laughing philosopher, toward the world in general, and forever find irrational monkey shines to enjoy. But, unless we become serious, active and earnest, there will be no democracy for Osteopathy. The majority of the public is ignorant in health matters. The doctors are glad of it. They like to speak of the profession and the laity. And they roll the two words in such a way as to show deep pity, mixed with disgust for the laity. The medical oligarchy makes the Kaiser look like a novice when it comes to tyranny.

Am I unjust in this? Very well, this has happened. A young lady, of poor parentage, afflicted with the worst case of knock-knees that a human being might possess and still be able to walk, came in to see me. Although she could not afford to pay, still I decided to take charge of her case because I was curious to find out just how much could be accomplished in such an extreme deformity. I outlined the proper exercises and she was to come in three times a week for osteopathic treatment. She had been a very bad rachitic case in infancy. I wished to hasten the reconstruction of the bones and outlined a diet rich in organic salts. She was to reduce the amount of carbohydrates and hydro-carbons and increase the proportion of vegetables and entire grain foods and so on.

Things went along very well for about three weeks. The young lady was feeling stronger and very well pleased. Her mother, who was a scrub-woman at the Tribune building, was feeling so happy at the prospect of her crippled child's recovery that she mentioned the case to Dr. Evans. At about five p. m. of this day, I was called to the phone and Dr. Evans was on the other end of the wire. He said he had been told about the case, apologized for having gone so far as to have the young lady brought in for examination, and stated that she was such a remarkable case and he so liked my line of procedure that he wondered if he might not co-operate with me in bringing about the cure. He wanted to come to my office and discuss the case if it was convenient. I was really having one of those busy streaks that osteopaths sometimes have and could not see the doctor. But, in justice to him, and to return the courtesy, I asked when I might go to his office and talk with him.

I must say that the doctor was very cordial for over half an hour. We discussed the case and planned to keep the young lady at the Home for Incurables at our expense and there we could see her through. All matters arranged, I was about to take my leave, when Dr. Evans, holding my hand, asked, "What school did you graduate from, doctor?" "At the Chicago College." "Of Medicine and Surgery?" It dawned on me, then, that he did not yet know I was an osteopath. "Why, no," I said, "I am an osteopath." He let go of my hand with a flinging motion, as if I were a serpent. His face reddened with sudden anger and he said, "I have wasted a half hour of time." And then the fun began.

I told the doctor several things and he told me a few. The doctor is possessed of the gift of gab and yours truly is not always lacking for words. I cannot say just how much oratory escaped us, but I'll bet the temperature of the room rose a few degrees. I did not have any cab wit in this case. (Cab wit, you know, according to Hubbard, is the inspiration that comes to you on the way home from a debate, and then you think of what you might have said.) I was all there. For about fifteen years I had primed myself for debates with "regulars" and they had always dodged such publicity. I do not care to attempt a complete report of our pyrotechniques, for I might mistake imagination for memory. But, I do want to report a few significant statements made by the doctor and leave it for every osteopath to imagine what he might have said under the circumstances.

"You osteopaths are the most ignorant lot of fanatics that ever cursed the world." This after a half hour's agreeable chat. "If I had the power I would put you all in jail for bamboozling the public as you do." Dr. Gorgas is doing his bit to carry out just such a move. If anyone thinks that the M. D.'s are ever going to help us here is an answer. "We have the upper hand and we intend to keep it. We know exactly what we are about. We have licensed the chiros and all other fakirs so that they shall get your goats by calling themselves Osteopaths and you can't help it. Even if you do get credit for an occasional cure, they do also, for many patients can get well in spite of any treatment." I interrupted the doc. here to tell him I agreed with him for the M. D.s had proven this point in view of the fact that many of us are still alive after two thousand years of their methods. He loved me instantly, in the same spirit as: Whom the Lord loveth he chastiseth. He found himself later and said, "The harm the chiros do

is not against our school, but your school. The public judges by results and no matter what harm a self-styled Osteopath does, the injuries committed are charged against Osteopathy. We are secure. The future of the Osteopathic school may be a chair in our schools, but that is all. You are doomed." When I asked him if he thought the public was being treated squarely by these tactics, he said, "The public is ignorant. It can only judge by results. The chiros claim as high a percentage of cures as you do. You know and I know that they fail, but the public is led into thinking that Osteopathy fails when a chiro claims that he is an Osteopath. This is what we aimed to do and have brought about, and, while it may be years before the public eliminates the Osteopath, it will happen." With this he laughed as cordially as the Kaiser might if he met President Wilson.

But, just think of Doc. Evans admitting that the public is ignorant after even he has been instructing it for so many years. The spirit manifested by the doctor toward the public for the sake of putting Osteopathy out of commission is quite typical of all the actions of the A. M. A. The "regulars" do not give a continental for the public's welfare. They advocate the use and enforce the administration of vaccines and serums, not because they have proven the efficacy of these things, but, primarily, because there is money in it for them. The fees they charge their patients, or the salaries they get for so-called public work, their dividends from the stock they own in the producing plants of these remedies, these are the factors that render them so per-

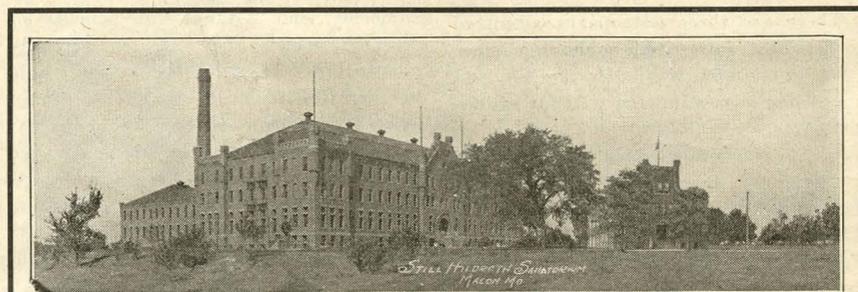
sistent in advocating such deleterious methods.

The above experience happened about two years ago. The patient in question, of course, had to leave me, because her mother's job was not secure if she continued with me. This fact I have since learned from friends of the young lady's family.

I must have pierced the skull of the doctor, however, for, about three days after our skirmish, he recommended Osteopathy to a rheumatist who wrote in for advice. This one instance is the unique glaring sign of good judgment that the doctor has manifested in all the years of public work. At this rate, how many years do you suppose it would require to make an Osteopath of him?

In closing, Doctor Evans said, in the course of his remarks: "Your chief spokesman is (——). I know him. I have known him for years. I knew him well before he studied osteopathy and I know exactly why he took it up. He and I discussed the situation and I understand all the circumstances which led to his entering your school at the fountain head. That his judgment was right is proven by the fact that he has made the money he set out to make. But, I know that he has no more use for osteopathy than I have."

It is reported that a veterinary surgeon has discovered a method for removing the bray from donkeys. He is one man who ought to be given free play to perform his operation *ad lib*. If Doc. Evans should read this he would say that I am the best reason why this surgeon should be given free play. Sic. Ergo: N. B. Descartes' quotation.



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Superintendent

## Osteopathy

(This is the third installment of the report made by Justice Hodgkins in reference to the Osteopathic physicians in Ontario. The report was made to the legislature.—Editor.)

I am rather loath to make the practice here of any physician dependent upon a certificate which is necessary vague as to qualification and education. But the American Osteopathic Association has taken a stand in favor of high standards of education and has had to deal with many who were in practice and had received their education under the old conditions. Many of those practicing here are elderly, and settled, and could hardly be expected to go to the United States for examination. And there is no one in Ontario to examine, except among the class to be admitted. Consequently, if the American Osteopathic Association, with which the Osteopathic Associations here are or can be affiliated, will certify any practitioner as qualified, in their judgment, to pass the test in such state, it ought to be a sufficient guarantee. It is probably the best that can be got, and if the admission of these older men be somewhat of an indulgence it will not hurt the medical profession, and their numbers will prevent any great harm being done to the public.

The license thus granted shall not permit its holder to use or administer drugs, nor to perform surgery with the use of instruments, nor to sign death certificates, nor to use the term "Doctor" either in full or otherwise indicated, and must be limited to Osteopathic methods and practice.

There are three Osteopaths admitted to practice in British Columbia since 1909 by examination under the Act, and none have been admitted without examination.

In Saskatchewan, since 1913, there is a Provincial Board to examine candidates for license to practice Osteopathy. Those practicing prior to the first of February, 1914, may be licensed without examination if possessed of a diploma issued by a school of Osteopathy satisfactory to the board. There are fifteen Osteopaths registered in that province, seven admitted under the Act, three by examination and five have left, one being at the front.

There appears to be no preliminary education required as a passport to the examination.

The experiments tried in the Western Provinces, while not resulting in the production of a large number of Osteopathic practitioners, are not conclusive

either way. The number of Osteopaths actually in practice compared with that of the regular practitioner, makes it evident that no serious dislocation in the system of education has yet arisen, and that no real difficulties, the solution of which would be of use in dealing with the question here, have yet occurred. This is due to the absence of recognition of the absolute necessity for high and exacting standards.

None of these provinces have the traditions or the achievements which characterize the province of Ontario, nor do they possess the high standards, both in education and the expense of equipment which are present here. Neither do they compare in numbers even in the smallest degree with the regular practitioners who are registered here to the number of 4,816.

The complications which will necessarily arise here are more comparable to those which are confronting medical education in the United States; and I cannot but think that more light is to be gained by considering and weighing them than by following the lead of the Western Provinces of Canada.

The inadvisability of enacting any legislation now in the direction of allowing one class of a learned profession to practice it without the range of study required of others is emphasized when one reflects that a statute of that kind passed now would not only provide Ontario with Osteopaths of the older and less advanced school—in fact, those whose education was bounded by a two or three-year course, with equipment which the Osteopaths now regard as insufficient, and without the benefits of research which they are so strongly advocating. Those of the future would be recruited from the long-term graduates of stronger Osteopathic colleges; and if so, why should the law be changed so as to allow Osteopathic colleges existing outside of Ontario to draw away and educate our youth when they would spend no more time nor meet less difficulties in the course than if they remained here?

There is one very pertinent reason why in Ontario there should be no haste in admitting to practice those who are not able to fully comply with the essential requirements.

It is this: That owing to the war, there will be a shortage of men properly and adequately trained in medicine. Until this shortage is overcome we ought not to permit the field to be occupied or filled by those whose education and experience has been acquired outside of

Canada and on lines that, even now, are not fully settled, and as to the correctness of whose fundamental conceptions there still exists grave differences, even among professed believers in their own system.

There are some practical objections which may be stated thus:

(1) The want of cohesion among those practicing Osteopathy in Ontario, and the consequent absence of any serious attempt to establish and maintain a high standard of attainment and practice.

(2) The small number of those adhering to Osteopathy.

(3) The absence of real financial support to any of the organizations already on foot, and, what is perhaps the most serious:

(4) The practical impossibility of arranging for clinical instruction and practice under our present system of medical training and the dislike of those connected with the collection and analysis of vital statistics to any departure from the rule that the cause of death must be certified by a practitioner duly qualified under our laws and by one whose training would enable him to detect or suspect the use of poisonous drugs.

Assuming such a teaching body to exist, can a member of it go into any of our hospitals and instruct his pupils by the bed-side? To do that assumes that he is the physician in charge of the case. Is this permitted in any of our hospitals, or will the attending physician allow an Osteopath to instruct a class by the bed-side of his patient? If so, it must be in isolated cases and under unusual conditions, and that, in itself, defeats the object of clinical instruction, which is to establish contact with all kinds of diseases in various stages, such as a general hospital affords, and not merely familiarity with an occasional case.

Upon the best consideration I can give to this important subject, I can see no escape from the conclusion that treating Osteopaths as a separate class in regard to their medical training would be, especially at this juncture, a very great mistake.

We have in Ontario no vested rights, no investment of any money, no large body committed to and pushing its propaganda, no graduate of an Ontario college of Osteopathy.

In the United States—from which all who practice Osteopathy here, come—there is a distinct and perceptible movement towards what may result in merger or affiliation, or, at least, in the standardization of medical training as between

the regular medical and the Osteopathic schools.

There remains to be considered the position of those who have been practicing Osteopathy since the decision of the Ontario Medical Act in 13 O. L. R. 501. This decision was pronounced on the 21st of November, 1906, ten years ago.

In March, 1910, a conviction against an Osteopath—R. B. Henderson—for practicing medicine was quashed by His Honor Judge Morson. I have no doubt that if these cases were to come up again, in the light of the present position of Osteopathy.

I find, taking the members of the Ontario Association of Osteopathy, and analysing the list of 86 of whom the association has furnished particulars, that up to the end of 1906 only 13 Osteopaths were practicing in Ontario, and that in the last 10 years an average of 7 per cent has come into the ranks. Out of the total of 86, 62 practice in Ontario, outside of Toronto, from Ottawa to the Soo.

Out of the list of 20 or 22 Osteopaths who represent themselves as the only qualified ones practicing in Toronto, 9 are American citizens, and out of 18 in the list who have furnished information, 3 are graduates of the College of Osteopathy, Los Angeles, California; 4 of the Still College of Osteopathy, Des Moines, Iowa; 8 of the American School of Osteopathy, Kirksville, Missouri; 2 of the Northern Institute of Osteopathy, Minneapolis, Minnesota, and 1 of the Pacific College of Osteopathy, Los Angeles, California.

The number of Osteopaths that have to be considered is, therefore, not large, because from the number coming in after 1906 must be deducted those who came here after the public promise of Sir James Whitney that the whole matter would be considered.

I find that practically two methods have been adopted to deal with like situations. One is, as in New York, to admit those practicing on a certain date, if, within 6 months, they can produce a diploma from a college which at graduation had a proper course of study in anatomy, physiology, pathology, hygiene, chemistry, obstetrics, diagnosis, and the theory and practice of Osteopathy, and prescribed a proper length of course and study.

Notwithstanding the conclusions I have reached I am not in favor of dealing harshly with those practicing Osteopathy here on June 30th, 1913. It is a matter of dealing fairly as between the public as a whole and the individual who has come here, and, according to

the decisions at that date, has broken no law in so doing. Consequently, as a matter of equity more than of legal right—because no one can have a vested right in regard to public health or private healing—I would recommend that those practicing in Ontario on the 30th day of June, 1913, be licensed to continue as Osteopaths only, provided that within six months they produce a certificate, under the seal of the American Osteopathic Association, that the association is satisfied, after due consideration of the case, that the person named in the certificate would be qualified to pass such an examination as is required in that one of the state of the American Union which recognizes Osteopathic practice, having the highest standard.

Of the 999 physicians on the 1916 register only 11 are Osteopaths, out of which 10 were registered under the act and one by examination since 1906.

British Columbia has no medical school and no faculty of medicine in its university, but the Council of the College of Physicians and Surgeons examines candidates for registration. They set no standard of preliminary education, but since 1909 admit Osteopathic candidates upon the production of a diploma from

an Osteopathic college recognized by the American Osteopathic Association. These candidates substitute for the practice of medicine and the theory and practice of surgery and examination in minor surgery, neurology and the principles and practice of Osteopathy.

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**THE A. T. STILL RESEARCH  
INSTITUTE**

**Annual Report**

The Board of Trustees of the A. T. Still Research Institute presents here-with a statement of the affairs of the Institute for the year ending July 1, 1918.

The Research Institute has suffered severely in several ways during the past year. The death of Dr. C. M. T. Hulett, January 23, 1918, Director of the Administration Department, was an irreparable loss, and the resignation of Dr. Frank Farmer, Chairman of the Board of Trustees, to enter the army, necessitated several changes. The general derangement of business growing out of the world war has also effected the Institute.

At the meeting of the Council, March 23, 1918, at which Drs. Atzen, O. E. Smith, Bischoff, Booth and Farmer were present, it was found necessary to cur-tail expenses for the ensuing year. This was done by readjusting contracts with faithful and efficient workers so as to keep most of the work going, but in such a way as to prevent the Board from facing another possible deficit at the end of next year.

Most of the research work under Dr. Burns' supervision has been transferred to the Pacific Branch of the Research Institute at Los Angeles. This is a great advantage on account of the climate which is so much more favorable for research work with animals than the climate of Chicago. Dr. Hoskins has charge of the X-ray and other laboratory work at Chicago, while Dr. Nicholson is continuing his studies and re-searches in the University of Chicago. The work is progressing to date as planned, with but little interruption.

A verbal proposition came from Kirksville, looking towards the estab-lishing of a branch there, but nothing definite has been accomplished up to the present time. It has always been the policy of the Research Institute to encourage Osteopathic research among individuals and in the colleges. Hence, any person or persons prepared to do work of that kind will receive all the encouragement and assistance the Research Institute can give.

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**STATEMENT OF ACCOUNT FROM JULY 16, 1917, TO JULY 1, 1918**

**RECEIPTS:**

Cash on Hand—July 16, 1917..... \$ 1,878.77

**ENDOWMENT:**

Endowment Fund Contributions.....\$ 560.50  
Mortgages Receivable ..... 6,000.00  
**6,560.50**

**CURRENT:**

Received from Treasurer..... 10,283.43  
Analysis .....\$ 84.00  
Book Sales ..... 2,831.31  
Clinic Fee ..... 3.00  
Current Fund Contributions..... 100.00  
Graduate Clinic Fee..... 5.00  
Interest on Mortgages..... 1,444.21  
Interest on Notes..... 3,510.30  
Junk Sold ..... 4.50  
Refunds ..... 9.93  
X-Ray Fees ..... 1,510.07  
Check Returned ..... 35.00  
Exchange ..... 4.65  
**9,542.57**

**DISBURSEMENTS:**

Remittance to Treasurer..... \$10,083.43  
Advertising .....\$ 56.30  
Animals ..... 18.75  
Animal Expense ..... 33.70  
Auxiliary (Pacific Branch)..... 279.40  
Books ..... 1,106.34  
Bills Payable (Miss Best)..... 300.00  
Campaign ..... 3,403.15  
Coal ..... 672.79  
Exchange ..... 30.80  
Gas ..... 53.19  
House Supplies ..... 149.29  
Light ..... 254.98  
Laboratory Equipment ..... 13.75  
Laboratory Supplies ..... 40.06  
Laundry ..... 78.57  
Office Equipment ..... 63.75  
Office Supplies ..... 42.61  
Petty Cash ..... 60.00  
Postage ..... 343.50  
Repairs ..... 245.34  
Refunds ..... 11.60  
Salaries ..... 7,555.22  
Stationery ..... 124.30  
Telephone ..... 74.93  
Traveling Expense ..... 314.50  
X-Ray Equipment ..... 551.20  
X-Ray Supplies ..... 723.35  
Interest on Notes and Mortgage..... 316.50  
Sundries ..... 461.26  
**17,379.22**  
Loan (Dr. Nicholson)..... 718.50  
Balance in Bank—July 1, 1918..... 84.12  
**\$28,265.27 \$28,265.27**

**BALANCE SHEET**

As at July 1, 1918

**ASSETS:**

Cash in Bank.....\$ 84.12  
Cash in Hands of Treasurer (Endowment)..... 259.62  
Cash in Valt..... 5.00  
Accounts Receivable—Books ..... 445.00  
Accounts Receivable—X-Ray ..... 120.25  
Notes Receivable—1334, \$100..... 133,400.00  
Notes Receivable—Miscellaneous ..... 285.00  
Pledges—142, 10 years, \$6.00..... 8,520.00  
Inventory—Books and Bulletins..... 4,077.00  
Mortgages Receivable ..... 19,400.00  
Stocks (2 Shares Am. Nat'l Assur. Co.)..... 100.00  
Real Estate and Building..... 15,000.00  
X-Ray Equipment ..... 1,700.00  
Laboratory Equipment ..... 981.69  
Inventory—Laboratory Supplies ..... 122.24  
Household and Office Equipment..... 800.00  
**Total Assets ..... \$185,299.92**

**LIABILITIES AND CAPITAL:**

Notes Payable .....\$ 2,750.00  
Mortgage on Real Estate and Building..... 7,500.00  
Reserve for Uncollected Bills Receivable..... 133,685.00  
Reserve for Uncollected Pledges..... 8,520.00  
Capital Endowment Fund..... 30,660.31  
Capital Clement A. Whiting Foundation..... 86.00  
Capital Current Fund..... 2,098.61  
**Total Liabilities and Capital..... \$185,299.92**

Most respectfully submitted,

E. R. BOOTH, Chairman,  
FRED BISCHOFF, Secretary.

September 14, 1918.

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"I cannot refrain from expressing again my great appreciation of the invention which you have made for the Osteopathic Profession.

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or

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It has a convincing appeal.

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It is just what your patient wants, too.

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# Osteopathic Truth

A MONTHLY JOURNAL OF  
OSTEOPATHIC PROGRESS

EDITED AND PUBLISHED BY

PRACTICING OSTEOPATHIC PHYSICIANS  
FOR THE OSTEOPATHIC PROFESSION

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OCTOBER, 1918

**"SPANISH" INFLUENZA**

How Many Cases Have You?

How Many Developed Pneumonia?

How Many Died?

How Did You Treat Your Cases?

Tell Us—And Our Next Number Will  
Be a "Flu" Number.

**50,000 HAVE GRIP IN BAY STATE**

**Massachusetts Governor Sends Out  
Appeal for Aid; Doctors and  
Nurses Needed**

BOSTON, Sept. 26.—Massachusetts,  
with 50,000 cases of Spanish influenza,  
appealed tonight for outside aid.

Direct appeal for assistance to Pres-  
iden Wilson, Governor Graham of Ver-  
mont, Governor Milliken of Maine, Gov-  
ernor Beckham of Rhode Island and the  
Mayor of Toronto was made tonight by  
Lieutenant Governor Coolidge, acting for  
Governor McCall. To President Wilson  
and the governors he sent this telegram:

"Massachusetts urgently in need of doc-  
tors and nurses to check growing epi-  
demic of influenza. Our doctors and  
nurses are being thoroughly mobilized  
and worked to the limit. Many cases  
can receive no attention whatever. Hos-  
pitals are full, but arrangements can be  
made for outside facilities. Earnestly  
solicit your influence in obtaining for us  
this needed assistance in any way you  
can."

New Hampshire and Connecticut were  
not asked to send help because of the  
prevalence of influenza in those states.

**Spreads in Boston**

The one day record of the epidemic  
in Boston was exceeded today, the mor-  
tality reports showing 123 deaths from  
influenza and thirty-three from pneu-  
monia.

The largest previous total for one day  
was 109 on Sept. 24. Since Sept. 14  
there have been 853 deaths in this city.

The death total in Massachusetts out-  
side of Boston for the past twenty-four  
hours was 720, with 2,143 new cases.

**750 Cases in New York**

NEW YORK, Sept. 26.—The total of  
cases of Spanish influenza in this city  
from the time the disease first appeared  
until 9 o'clock this morning was 750.  
Nearly half of the cases developed in  
the preceding forty-eight hours. The  
number of deaths, however, is less than  
twenty, although that does not include  
the mortality from pneumonia. There  
were six deaths from influenza and  
eleven from pneumonia in the twenty-  
four hours ending at 9 a. m. today.

**26 STATES ARE SWEEPED BY EPI-  
DEMIC OF GRIP**

WASHINGTON, Sept. 25.—Spanish  
influenza has spread over the country so  
rapidly that officials of the public health  
service, the War and Navy Departments  
and the Red Cross conferred today on  
measures to help local communities in  
combating the disease.

Surgeon Gen. Rupert Blue said to-  
night the malady has made its appear-  
ance in twenty-six states from the Atlan-  
tic to the Pacific. The disease is epi-  
demic in New England and officials in  
that section are considering the preven-  
tion of public gatherings.

The disease continued to spread today  
in army camps, 5,324 new cases being  
reported to the office of the surgeon gen-  
eral of the army up to noon. There are  
fifteen camps and stations free from  
influenza.

**GRIP KEEPS 142,000 DRAFTED  
HOME**

WASHINGTON, Sept. 26.—Because of  
epidemics of Spanish influenza in army  
camps Provost Marshal General Crowder  
tonight canceled calls for the entrain-  
ment between Oct. 7 and 11 of 142,000  
draft registrants.

The acting surgeon of the army to-  
night announced that 6,139 new cases  
of Spanish influenza in the army camps  
were reported today. New cases of  
pneumonia developed during the twenty-  
four hour period totaled 722. Deaths  
from all cases in the camps aggregated  
170. The total number of cases of Span-  
ish influenza in the camps to date is  
given as 35,146; total pneumonia cases  
3,036.

**Close Washington Churches**

The churches in Washington have  
been asked to close until after the epi-  
demic is completely stamped out. All  
dance halls and hostess-houses there have  
also been closed. The most effective  
way to combat the epidemic, all health  
authorities have agreed, is to prevent  
public gatherings and to have people  
spend as much time as possible out of  
doors.

The number of cases of pneumonia  
yesterday in army camps was nearly  
double the number reported for the day  
before; the death rate, however, was  
lower. The total number of influenza  
cases in camps now is 127,975; pneu-  
monia cases, 10,429, and deaths, 2,869.  
New cases of influenza among soldiers  
training in the country yesterday were  
12,975.

**"FLU" INVADES SENATE**

Washington, D. C., Oct. 4.—Senator  
King of Utah is the first senate member  
reported ill with Spanish influenza. He  
has been confined to his home since  
Sunday and his ailment, his secretary  
said today, has been diagnosed as influ-  
enza, though his condition is not seri-  
ous.

Washington churches were asked to-  
day to suspend all services until fur-  
ther notice, and playgrounds were or-  
dered closed. This follows the closing  
yesterday of the public schools, thea-

ters, and moving picture houses. Today's reports showed a steady increase in the number of influenza cases in the capital.

**PENNSYLVANIA IN CALL FOR DOCTORS TO FIGHT INFLUENZA**

HARRISBURG, Pa., Oct. 7.—An appeal for 500 doctors and 250 nurses to volunteer their services by noon tomorrow to fight influenza, which is spreading thruout the anthracite regions of Pennsylvania and appearing in the bituminous section, was made today by Dr. B. Franklin Royer, state commissioner of health.

The commission said: "We are organizing to fight the disease everywhere, and there is urgent need of doctors." Dr. Royer estimated there are more than 150,000 cases in Pennsylvania.

Field hospitals have been established in Harrisburg and Steeltown by the state and municipal authorities. Adjutant General Beary supplying tents and cots from the state arsenal. Canvas and equipment will be sent tomorrow to other places.

**Osteopaths Tender Aid**

Help in the anti-epidemic campaign was offered Dr. Drake, Dr. Robertson, and Dr. A. Augustus O'Neill, chairman of the emergency commission handling the situation in a set of resolutions passed by the Chicago Osteopathic association at a meeting at the Hotel Sherman.

The resolutions tendered the services of the members of the association "to the United States naval and military authorities and to the civil authorities, either through the American Red Cross or otherwise," and offered the use of the osteopathic physicians' hospital at 5200 Ellis avenue, which has a capacity of about 100 beds.

The osteopaths also charge that several of their members had tendered their services for the epidemic, but had been ignored. Against this the resolution protested.

Dr. O'Neill, as medical director for the Red Cross, received from Dr. Franklin H. Martin of the volunteer medical reserve corps a call for additional names of physicians whose services will be available for the public health service if they are needed.—CHICAGO TRIBUNE, Oct. 5th.

**HERE IS THE RESOLUTION**

At a meeting of the Chicago Osteopathic Association, last evening, at Hotel Sherman, there was a general dis-

cussion regarding the present epidemic of so-called Spanish Influenza, and one Physician reported sixty-five cases under his care. The following resolutions were offered and unanimously passed:—

WHEREAS, the present Army, Navy and Civil Medical authorities have failed to combat the epidemic of so-called Spanish Influenza, and,

WHEREAS, no logical treatment or cure has been offered by these medical authorities, and,

WHEREAS, the appeals through the Daily Press have been made by the American Red Cross and the civil medical authorities for the assistance of every physician and the use of all available space for the care of those afflicted by this epidemic, and,

WHEREAS, the Osteopathic Physicians are legally recognized by the State of Illinois as fully capable of treating and handling all human ailments, and,

WHEREAS, a number of Osteopathic Physicians have tendered their services without recognition, and,

WHEREAS, the experience of the Osteopathic Physician in the handling of like conditions has been such as to reflect nothing but credit, and,

WHEREAS, the Osteopathic Physicians of Chicago have an up-to-date hospital of a capacity of about 100 beds, and,

WHEREAS, we recognize this is no time for criticism or complaint, but a time when service is necessary; with the desire of best serving Humanity and our Government, and with this privilege solely in mind,

BE IT RESOLVED, that we again, as an Association, tender the services of its members to the United States Naval and Military Authorities, and to the Civil Authorities, either through the American Red Cross, or otherwise, in treating this condition, and that profession tender the use of its Hospital for the care of these patients, and,

BE IT FURTHER RESOLVED, that copies of this resolution be sent the Daily Press, to Dr. A. Augustus O'Neill, of the American Red Cross, to the Medical Authorities of the neighboring camps, to Dr. C. St. Clair Drake, of the Illinois State Board of Health, to Dr. John Dill Robertson, of the Health Board of the City of Chicago, and that this Association as legalized Physicians go on record as protesting against the ignoring of them in their offer and tender of service in this crisis.

Signed,

Committee,

Dr. Joseph H. Sullivan, Chairman,  
Dr. Frank J. Stewart,  
Dr. Jesse R. McDougal.

**THE FIGHT IS ON!**

H. R. 5407—S. 4919

Justice and right will win.

The supreme effort will be initiated on October 17th, when all of us will ask our patients to sign a petition and address letters to the President, Senators and Representatives according to the plans worked out by our National Legislative Bureau, headed by Dr. Geo. W. Riley.

The fight is on but be not weary. Success is only attained by keeping everlastingly at it. You never missed a call when you were caring for those influenza cases, even though you were weary enough to drop, but you kept everlastingly at it, and we are willing to wager that you never lost a case.

Now face the issue. Your future and mine depends upon how well we work together in this supreme moment. The world is watching us and particularly will the result affect the medical profession when our united efforts fall with telling effect. They will fear us all the more in state legislative campaigns if we break their power. This influenza epidemic is showing to the world their fallacious teachings and since statistics sometimes tell a tale, our results will stand out like the burning building on a dark night, so plain that no one will dare deny the superiority of Osteopathy.

Our soldier and sailor boys should have Osteopathic care, and since the proof of the pudding is in the eating, it is being plainly demonstrated that medical attention has availed naught—but death.

Gird on the armor of truth and with a firm determination of having your rights prepare to sacrifice time and money in carrying out the following instructions which were sent to you recently.

THERE IS NO SUCH WORD AS FAIL IN THE BRIGHT LEXICON OF OSTEOPATHY.

(Doctor: This is very important. You will need it every day of the campaign. Don't lose it.)

**INSTRUCTIONS FOR CAMPAIGN**

**THE PURPOSE**

1. To get every Father, Mother, Wife, Relative or Friend of a man in the service or in the draft to:

1. Sign a petition to Congress.

2. Write a short letter to the following: President Woodrow Wilson, both Senators of this State, Representative from local Congressional District, requesting each of these four to give their support to the Osteopathic Bill, in order that the services of Osteopathic Physicians may be available to our soldiers while in the service of their country.

3. If such patient or friend is per-

sonally acquainted with either the President, the two Senators or the Representative, ask them to write such acquaintance a personal letter. Also ask all men of prominence such as Governors, State Legislators, Judges, Mayors, Postmasters, etc., to do likewise.

#### NECESSARY STEPS DURING CAMPAIGN

1. To prepare complete list of present and former patients and friends.
  - List 1. Name, address and phone number of every patient and friend in your city.
  - List 2. Name, address and state of patients and friends out of city. List vitally important. Success of campaign depends largely on these lists.
2. Begin, the morning literature reaches you and phone every patient requesting them to come to your office to sign Osteopathic petition. If necessary, call on them personally.
3. When patient calls request him to sign petition.
4. Next request him to write four short two or three line letters, one to the President, one to each of the Senators, and one to the Representative from his Congressional District.
5. All four of these must pass upon the Bill before becoming a law.
6. Request each patient to have every other member of the family and friends also write. This is essential to show full strength of Osteopathy. Representatives and Senators will estimate the demand for this legislation by the number of letters written. Have every available person write.
7. To insure letter being written, employ one of the following two methods:
  1. Request patients to bring letters they write to your office when written.
  2. Request patients to bring or phone replies received from Congressmen to your office, stating your desire to know their attitude towards the Bill, and that you have been requested to report to Headquarters.
8. Some patients will volunteer to get friends, employees or neighbors to sign. Encourage this and provide additional folders.
9. Some patients will volunteer to solicit all homes with Service Flags in window. Encourage this, also.
10. Call on your friends personally; also on patients where necessary.
11. Solicit all city, county and state officials in your city.
12. Take petition and folders to meetings of clubs. 177 members of Oakland Rotary Club signed. Request writing of letters on own stationery.
13. Request each patient to have resolutions passed by his club, lodge or organization, and request that these resolutions be sent to all local newspapers.
14. Wherever patients volunteer in formation of personal acquaintance with Representatives, Senators or the President, or other influential men in Washington or elsewhere, keep record of this information for future reference. Have all these men write a personal letter.
15. If patient is personally acquainted with Representative or influential men from other states, have them write these, also.
16. Quota for campaign is 50 signatures and 200 letters, or total of 250 either signatures or letters. 250 will be "over the top," but every Osteopath should get 1,000.
17. Emphasize the writing of letters, as each letter is worth 10 signatures on petition. Petition used largely for purpose of introducing subject to patient and getting letters written.
18. Don't write to patients unless absolutely impossible to see them personally.

#### REPORTING DURING CAMPAIGN

1. Attend noon luncheon each day during campaign. All reports should be made at noon luncheon—team members to Captains. Captains to City or District Chairmen.
2. Team members not present at noon luncheons must report before 2 o'clock.
3. Captains must call all team members who have not reported promptly at 2 and get reports.
4. Captains must call Chairman before 3 o'clock.
5. District Chairman must call Captains who have not reported promptly at 3 o'clock.
6. District Chairman must report to State Chairman by telegram before 4 o'clock.
7. State Chairman must send report to Headquarters by night letter.
8. Letter from Headquarters will go out to every Osteopath next day, giving total number of signatures and letters of every state in Union; also total number of Osteopaths co-operating in each state, and percentage of results secured.
9. Reports must be made every day during campaign.
10. Reports must be made every day during campaign.
11. Petitions and literature will be sent direct to each Osteopath. All additional literature needed should be secured from Captains, Captains from District Chairmen, District Chairmen from State Chairmen, State Chairmen from Headquarters.
12. Report sheets and detailed explanation of campaign will be mailed to each Osteopath.
13. Captains and District Chairmen will be sent special report sheets by State Chairmen.
14. State, Congressional District and County organizations, previously established, are responsible for success of this campaign.
  - County Chairman must see that every Osteopath in his county works on this campaign.
  - Congressional District Chairman must see that every Osteopath in his Congressional District works on this campaign.
  - Organization previously established is not for the purpose of conducting this campaign.
  - County Chairman might be appointed as a Captain, or he may be a team member.
  - District Chairman may be elected as District Chairman of this campaign organization, but whether or not so selected, they are in all instances responsible for the Osteopaths of their county or district in addition to duties in connection with campaign or organization.

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#### CHANGE OF CLIMATE

**Henry M. Bowers, D. O.,**  
**Albuquerque, N. M.**

Dr. Bowers believes in his own country and the climate of some parts. We are glad to print the results of his observation in these cases.—Editor.

I wish to comment on an article appearing in the August number of the Osteopathic Truth, entitled (Change of Climate) by Dr. Feidler, of Seattle, Wash.

Dr. Feidler starts his article by saying: "I see you have sent another of your patients to Arizona. Why did you do it? What good reason did you have for sending him there? You are silent, you are guilty. You had no good reason."

I say to you there are many good reasons for sending T. B. patients to the southwest. The Dr. did not refer to New Mexico, but the same rule would apply here as there.

I will refer to cases in my own family. I have had three brothers with T. B. and I honestly believe that they would all be in their graves today if it were not for the fact that they came to New Mexico. The doctor advises that they stay at home or as near home as possible. Let's see how it worked with one of my brothers. We lived in a middle west state, where it is warm in summer and cold and damp in winter. He became infected. We tried treatment in that country for over two years and he grew steadily worse. He then came to Albuquerque, New Mexico, and died two months later. Why did he die? Because he had stayed in that damp climate until there was so much lung tissue destroyed that he could not get well in any climate. My two other brothers contracted T. B. the next year. They came to Albuquerque immediately, rested some months and are in business here today. Did the climate do anything for them? I will leave you to judge.

He points out the fact that one will find unbearable heat, dust, flies, grafters, and lungers galore. In this country you will find thousands of cases of T. B., but as to flies, there are no more here than you find in other places. Unbearable heat is also minus in New Mexico, except in the southern part. There are parts of Arizona that is extremely warm in the summer as, Phoenix, Tucson, and Yuma, and patients should not be advised to go there in summer, but the winters are beautiful and a great many people go there then.

Albuquerque has a very even climate all the year around; in the summer it is between 80 and 90, rarely gets to 95. In winter it is warm most of the time, rarely gets down to zero.

The doctor referred to grafters. I don't quite understand what he means. If he means living expenses, I will say they are some higher here than back east. One can get into a first-class sanitarium here for \$55.00 a month; this includes board, room and nursing. I will let you judge if this is holding people up.

The doctor goes on to say that when a patient first comes here the change of scenery, novel sights, Indians, interest him and that for a time he don't have any time to think of his disease and he seems better, then in a short time he states that the patient will grow tired of his surroundings and finds out his condition is not better, but worse, and that his money is low and everything is so high, even a cup of warm water costs him ten cents, and that the food is bad, the heat is unbearable, flies torture him to distraction and he finally gives up and dies.

I can point to hundreds of cases of T. B. that have come to this country and no such fate overtook them. A great many of our leading men of the state came here with T. B. and got well. True lots of them die, but let me tell you one thing, that a great majority of the cases that have died are people that stayed back east, and their doctors said it would be the best, and when they knew there was no chance for them to get well, they came out here and of course some of them died.

I say frankly, and statistics here will bear me out, that from 60 to 80 per cent of incipient Tuberculosis cases that come to this country, get well. And that is the reason I am answering this article, for I believe the people should know about conditions here and I cannot for the life of me see where Dr. Feidler got his information.

He says people cannot walk on the sunny side of the street, and that the enterprising merchant sprinkles the shady side of the street to cool the atmosphere from 105 down to 99. I will say that the merchant in this country has something to do besides sprinkle streets; we have street sprinklers for this job and the merchant is busy in his store, for this is a thriving country.

True, the temperature in some parts of Arizona and New Mexico does reach 105, but the doctor doesn't say where it is, nor the time of year. These are big states and one can have almost any kind of climate they wish the whole year round. In the hottest weather one can find in these states snow capped mountains, and in the winter one can have a temperature that will be 80 if he chooses.

The sunshine is one of the big assets of

the southwest and no T. B. germ will live very long in this sunshine.

He says the mountains are no place to send tuberculars; yet all the leading men on T. B. agree that climate has something to do with the cure; some of them put it as high as 80 per cent, some as low as 15 per cent, and they all agree that altitude from four to six thousand feet is the ideal place, and that a warm even climate is the best, and I don't understand how Dr. Feidler can advise T. B. patients to go to Alaska. He says T. B. does not exist there. The reason for that is because no one has ever gone there with the disease. Years ago T. B. did not exist here. Tuberculosis is a disease of civilization. It is a white man's disease and the natives here knew nothing about it until the white man brought it here.

If there is nothing in climate, why is it that men, after they have been cured here and are getting along fine, go back east and then break down; there are hundreds of such cases. I was talking to a man today who was in the Navy some years ago; he was up in healthy Alaska, took a deep cold and later developed T. B. He was sent, together with another T. B. patient who was on the same boat, to the sanitarium at Los Anamis, Colo. They both got well; one went back to New York, the other stayed in the high altitude. The patient that went to New York died of a hemorrhage, the other fellow, I know well, and is working every day.

There is a multitude of evidence which shows that climate has a great deal to do with the treatment of T. B. and I think

most authorities will say that a warm even climate about 5,000 feet high is the best place to send tubercular cases. This we have here in the southwest, where there is plenty of sunshine (about 345 days in a year), an even temperature, very few dust storms and good air.

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**"The Bugle"  
Reveille in the Life Beyond**

"My mission," says the "author" in the statement credited to him, "is to write a story of my brief experiences in the life eternal. My ardent desire is to reach my friends on earth who are sending out of their homes the sons who may come home no more."

"A Reveille of the Life Beyond" is the explanatory title of the book. That Dr. Achorn himself designated the title, the color (a deep sea green) and design (a silver bugle in the upper left-hand corner) of its impression upon the book and other particulars of the book's mechanical design is stated by Dr. Hicks in the Battle Creek newspaper which had a half page write-up about the book on August 11th.

**Method of Communication Is a  
"Mental Vibration."**

The "author" says the method of communication is a mental vibration between harmonious spirits. "My secretary seems myself as I write. Her hand is given to my control as I might once have used a fountain pen."

Dr. Hicks says she is neither experienced nor especially well read in psychic research and that this has come to her in a most natural way. "About a year ago," she states in the preface of The Bugle, "I was sitting alone in the twilight with a pencil and pad at hand, when I wrote automatically, 'Hugh is my friend. Give him my love. L. Achorn.'"

Hugh is Dr. Hugh W. Conklin. Both Dr. Hicks and Dr. Conklin were classmates of Dr. Achorn in Kirksville, but although Dr. Conklin and Dr. Achorn were very intimate friends, Dr. Hicks knew him only as a classmate and in after years hearing of him through mutual friends or reading articles in the scientific journals.

**Wanted to Be in the War**

These communications increased and in length. From the beginning of the entry of the United States into the war and the call for young men for service

the communications expressed deep interest in the American cause and L. Achorn wished "to fire his Winchester." So with "exultation of spirit" the writings explained a command laid upon him to deliver to mothers whose sons should pass to life eternal during the conflict a message of assurance of their continued existence and progression in that life, their retained memory and interest in home and the earth friends.

**Marvelous Book**

From preface to conclusion the "author" tells his own story, and fashions his own message. As to his sensations in passing to life eternal he says he was at first dazed as one only partly awake, gradually becoming stronger and able to adjust himself to the new life. He soon realized that life there was one of progress and development and that the first step in that progress was to pay his earthly debts; that he brought with him a record of the past, some deeds to his credit and some to his debit and that his account must be balanced before he could go on to higher attainments. By his success in writing this book and reaching the woman in sorrow with a message of comfort he says he will have gained a credit in this balance of accounts.

**Still Ministers as a Physician**

In spite of his passage into another life the "author" asserts that he even now ministers as a physician to those on earth.

"A child is sick. The mortal parents are caused anxiety over its feverish condition. \* \* \* A spirit hovers near. The child ceases its cry." Later, "Both patient and physician feel the subtle influence of my presence but neither could say that another purpose had been added to his own." Again the deep spiritual import of the book is brought out in this passage, "Many, many struggles are won because a friendly spirit is at hand strengthening, encouraging, upholding in the hour of despair. Many, many conflicts are lost because the soul turns from the spirit and does not in its inner consciousness hear the friendly voice."

**Mothers of Men**

The references to the war are most interesting. "Our foe is not a person," he says, "but a strength fighting and uprising against families and foundations of nations. The force is a force so evil that much good will stand against it; and good cannot fail, so our fight is won. \* \* \* The balance of power rests between our fine young men and the beasts—our foes. \* \* \* My secretary

says a train of men is leaving and speeding away. \* \* \* This is my word of farewell and I say, 'Good-bye, old fellows, just smile and see the sunshine ever in the depth of darkness and evil shadows. \* \* \* A falling man a rising star shall be. A man whose life is his country's, whose life is God's to use as an instrument to restore the world to brotherly relationship is never to be forgotten; rather he will rise to heights which others work many years to attain. The body of a man who falls upon the field of conflict is shattered by the blow; but rifles shatter only the body, not the soul. A tribute cannot recall them; but a glorious mission is mine, to write what I know of the soul which reaches our life."

"Must I remind you, mothers of men, that your sons who fight and fall on the battlefield are not lost? Only the mortal body ceases to be. The mind, the soul, the spirit will live on and on, ever increasing in power to serve men and save them from their own destruction."

**George H. Dorans Co., Publishers**

The George H. Dorans Company of New York are the publishers of the book. There are 108 pages.

The book is remarkably clear, coherent, matter of fact and even intimate. Whether the book is accepted as to its origin, it offers a fine attitude toward daily living.

There is a great demand in England at this time for books of this character and the branch house of Dorans Company in England expect a large sale.

We congratulate Dr. Hicks upon her success as Dr. Achorn's secretary in the compilation of the book, and trust that she may some of these days have a message for our profession.

Dr. Kendall Achorn practiced in Boston prior to his death in an automobile accident in August, 1916. His many friends will be more than pleased to hear of this wonderful book from beyond the grave.

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Dr. Mary Gamble has removed her office to Suite 510 Templeton Bldg., Salt Lake City, Utah.

Dr. J. A. Overton has located in De Soto, Mo. for practice.

Dr. Mae Hawk Van Doren has removed her office from 1210 First Nat. Bank Bldg., Pittsburgh, Pa., to 407-410 Nixon Bldg.

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By

Kendall Lincoln Achorn, D. O.

Assisted by

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We are told of the sensations of passing from the Earth Life to the Life Eternal; of the spiritual relationships of the "citizens" there; and of this young man's ministrations even now, as a physician, to those on earth.

All who have read the remarkable revelations of "Raymond" will receive with special interest this corroborative evidence of conditions on the Other Side. All who are suffering the irreparable loneliness which the war has brought to so many will find here courage and solace.

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## Osteopathy—A General Discussion

By Joseph Luhan, Chicago

First Prize Winner, Essay Contest Conducted by the Illinois Osteopathic Association Last Year.

The word "Osteopathy" is devised from two Greek words, "osteon" (bone), and "pathos" (disease), so that it may be literally construed to mean "bone-disease"; or more generally, the system of treating diseases indicated by bone disorders. However, so meagre a definition, based merely upon the derivation of a name, is apt to produce a misunderstanding concerning this new branch of medical science. This article has for its purpose the dispelling of any such illusions by a clear explanation of the principles and practice of Osteopathy.

Osteopathy is comparatively in its infancy. It was founded forty-four years ago (1874), by Dr. Andrew Taylor Still, a physician of the "old" school. Dr. Still was an original thinker; he came to the conclusion, after much study and confirmatory application of his principles, that disease, nearly always, was caused by a mechanical blockade to nutrition: and that, with such mechanical disease cause removed, the natural vital forces of the body would restore it to health, without the aid of drugs. These conceptions of Dr. Still form the fundamental basis of Osteopathy.

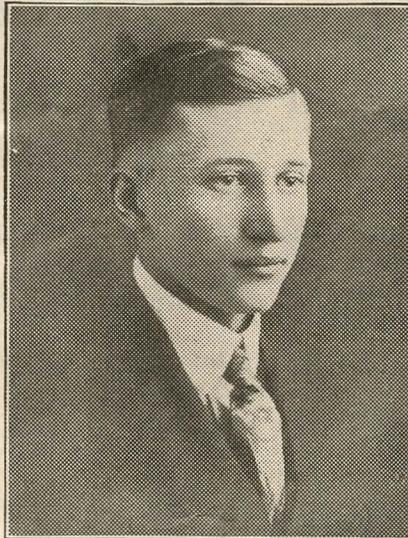
Osteopathy emphasizes the fact that the human mechanism exists and its nutrition proceeds on a mechanical, as well as on a chemical basis. Osteopathy teaches us that disease, by which is meant the abnormal functioning of the body, is dependent upon structural defect, usually as the primary, yet sometimes as a secondary cause. Osteopathy calls these structural defects "lesions"; they may be osseous, ligamentous, muscular or nervous in character. When there is such a lesion in the human body and it serves to obstruct the normal flow of nerve impulses and blood to certain organs, it is evident that the body will function abnormally, as a result of this mechanical disorder.

The human body, that wonderfully intricate and complete mechanism, the machine of twelve thousand parts, infinitely complicated because of the mechanical and chemical relations these parts bear to each other, is fully endowed by nature to keep itself in perfect running order for an ordinary term of life. It possesses its own chemical laboratory. It is adequately protected against deadly disease germs by the billions of tiny phagocytes which patrol the blood and tissues, valiantly attacking and devour-

ing intruding microbes in terrific mimic battles so that the body might live.

Drugs that are introduced into the body for combating disease act as foreign substances, as poisons which the body must dispose of. If an anaemic person lacks iron in his blood, the only way for him to obtain it is thru the body's own selective action, and not thru a squalid, inabsorbable dose of an iron solution.

The human organism, like any other machine, may get out of order, and a condition known as a disease will man-



JOSEPH LUHAN

ifest itself. Now Osteopaths contend that the so called "symptoms" of disease, such as pain, are results and effects, not causes. The Osteopath does not attempt to treat the symptoms, but finds the hidden mechanical cause and removes it, whereupon the symptoms disappear in the wake of the cause, and Nature rebuilds the body to health. **The only force that Osteopathy ever employs to overcome disease is the sole agency ever operative under any treatment—the vital forces of the body—Nature's constant tendency toward the normal.**

To summarize what has been said: Osteopathy's function in the treatment of disease is to correct the structural abnormality causing the improper functioning of the body, thus restoring a harmonious activity to the human mechanism; after which the natural recuperative forces, free to act, rebuild and restore health.

An osteopath must possess a very comprehensive knowledge of human anatomy and physiology. In treating a case of disease, he first performs a diagnosis to locate the seat of the pathological condition, and to find out how far the tissues have been affected by the disease; then he closely examines the vertebrae, ribs, etc., for evidence of disturbed relationship of these parts. For the various diseases, the osteopath knows exactly where to search for the mechanical obstruction. When he finds the exact spot of interference with nutrition, he determines whether the treatment must be Osteopathic, surgical, or otherwise. If it is to be Osteopathic (as in nearly every case), he corrects the structural

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abnormity by a skillful manipulation. Most bony lesions occur in the spinal column, where the removal of such a lesion requires extreme delicacy of manipulation involving a very sensitive touch on the part of the Osteopath.

**It must not be forgotten that Osteopathy is a complete system of therapeutics, applicable not only to special classes of disease, but alike to all curable diseases.** This is evident from the basical theories and conceptions of Osteopathy that have been herein set forth. It has so proven in practice; in fact, its rapid progress since 1874 is largely due to the success with which Osteopathy has treated the many and diverse so-called "incurable" diseases abandoned by other schools of medicine as hopeless. Osteopathy has never claimed itself to be a "cure-all". Within its almost universal range fall diseases that are acute and chronic, structural and organic; cases both medical and surgical.

The educational qualifications of the Osteopathic physician and the doctor of medicine are practically the same except in the subject of therapeutics—the treatment of disease. A thorough training in the principles of Osteopathy and their practical application in the treatment of disease is substituted, in the Osteopathic curriculums, for the pharmacology and materia medica of the medical curriculums. The Osteopathic standards of education are high. The American Medical Association requires a four-years course with a minimum of four thousand hours, while the American Osteopathic Association requires three thousand, seven hundred and thirty-one hours in a three-years course. The majority of the recognized colleges of Osteopathy, however, require over four thousand hours; even some maintain a four-years course with a curriculum of more than five thousand hours.

The Osteopathic physician and the doctor of medicine have many things in common; they both advise diet, employ hygiene, correct bad habits, and use surgery if the occasion demands, etc. The point of departure is that the Osteopathic view of cause and effect in pathology differs from that of medicine; that the Osteopath corrects structural defects while the doctor of medicine administers drugs. Which is the more rational treatment, Osteopathy or drugs?

The answer: Osteopathy is rational, logical and sensible; it seeks out the causes of disease, removes them, and then allows Nature to accomplish the rest. **Of course, Osteopathy uses antidotes to neutralize other poisons, antiseptics to destroy parasites, and anaesthetics to permit certain sur-**

**gical operations; but it never imposes an undue burden on the natural recuperative powers of the body by giving medicines to a patient.**

On the other hand, what can be a more irrational mode of treatment than to attempt to cure a disease by stifling and muffling the effects of the pathological condition while completely ignoring the cause of the disease? Such a treatment is that which the doctor of medicine employs. His diagnosis of a disease will end with a classification of those very fallible guides—symptoms—with a view, of course, toward locating the cause: but the causes of disease, according to his school, are explained by no one general principle; the causes which are stated in medicine as primary, altho they are amazingly diverse and disconnected, never embody the most important principle of disease cause—mechanical obstruction of nutrition.

To illustrate the foregoing discussion, let us consider a typical case of "stomach trouble". We can imagine the case of a man, who, thru a previous attack of typhoid, or thru a sudden jar or blow, has one of the vertebrae of his spinal column drawn out of line, resulting in an interference at this point with the nerves controlling the secretions and blood supply of the stomach. If this lesion persists, these nerves will send a jumble of confused and abnormal impulses to the stomach, producing indigestion, or some other form of "stomach trouble". Now let an osteopath treat this disease, and he will detect and correct the mechanical derangement, and then allow the resident curative powers restore the body to health. However, give the case to a doctor of medicine. He will prescribe certain mysterious poisons for the patient, whereby he attempts to alleviate the distressing symptoms; when nothing but irritation and a decrease of the patient's vital forces will invariably result, while the disease will persist till the lesion is removed.

Very much of the present science of medicine is founded on tradition and guess work. Advanced medical thinkers have come to the conclusion that medicine will not cure disease. Sir Frederick Treverse, once physician to the King of England, in a speech at the opening of the London Hospital, said that he believed that "the time is not far distant when people will leave off the extraordinary habit of taking medicine when they are sick." Another prominent medical authority, Dr. Osler, "Dean of American Medicine", said: "Sensible doctors have reached the conclusion that typhoid

fever cannot be treated with medicine." Dr. A. D. Bevan, of Chicago, said: "Drug treatment is useless in cases of pneumonia".

Finally, what are the prospects for osteopathy in the future? Probably the best argument for its future is to be found in its history. The first college of osteopathy was established by Dr. A. T. Still in Kirksville, Mo., 1892, which had a class of eighteen pupils. Since that time, seven well equipped colleges, with Osteopathic hospitals in connection with them, have been established in the United States. Besides these schools, the A. T. Still Osteopathic Research Institute has been established in Chicago, Ill. There are over seven thousand practicing Osteopaths in the United States and Canada. In nearly all the States Osteopathy has been legally recognized, and in some, as in Illinois, the Osteopaths have been granted separate State Examining Board. The American Osteopathic Association enrolls fifty per cent of all graduate Osteopaths.

With such facts, can anyone deny that the public appreciates Osteopathy? Likewise, what untold possibilities will the future hold for Osteopathy, the modern science of healing!

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## A Little Matter of Ethics

A. L. Evans, D. O.

There is a disposition on the part of a good many laymen to look with distrust upon anything having to do with the ethics of the professions. This fact is largely to be accounted for by the over-use, or rather the abuse, of the science of right conduct by members of the medical profession. Their code of ethics has sometimes been distorted by them from its proper function and has been made to serve the end of protecting a confrere from deserved punishment for flagrant malpractice. A too rigid adherence to the letter of the law has often resulted in the withholding, in an emergency, of needed medical attention. So there is ample excuse, if not reason, for this popular suspicion of medical ethics.

But so long as human nature remains as it is there will be need of the restraints which are imposed by a prescribed code dealing with the various aspects of professional conduct. There is of course, as much reason for the observance of ethical principles on the part of members of the osteopathic profession as of any other profession. In this brief paper I shall deal only with that phase of professional conduct having to do with the relations of physicians to each other. If I may be able to say anything that will prevent the young practitioner from falling into error, or prompt some older one to a self examination, I shall feel amply compensated for my trouble, and I may be pardoned for obtruding upon the attention of a profession confronted with big, vital and pressing problems one which many may be disposed to regard as of minor importance. Let me remark, however, in passing that the destiny of the profession is dependent upon the sum of little things, and that a proper handling of these small matters will do much to give us that unity of spirit and action so much needed for the accomplishment of greater things.

When a patient comes to a physician from a colleague temporarily away from

practice, or unable at the moment to give time to a case requiring immediate attention, if the physician receiving such patient is an ethical man he regards it as a point of honor that that patient shall be restored, at the first opportunity, to his former physician with his confidence in him unimpaired. If the substitute physician really discovers something in the case of importance that had escaped the notice of the regular attendant—as he may—he will privately give the regular physician the benefit of his observation and advice, thus the patient's interests will be served and his confidence in his physician will not be undermined. But when the patient of another falls into the hands of the unethical doctor he at once begins craftily to sow the seeds of disparagement and distrust of his predecessor.

Upon one occasion in conversation with an osteopathic practitioner from a far distant city I took occasion to inquire of him how one of my friends in the profession—a man of singular ability and uprightness of character,—who was practicing in the same city was getting along. This was the rather startling reply:

"Oh, Doctor Blank has them coming, all right; he has the best practice of any one in our city. But he is a four-flusher, and when I get hold of any of his patients they never go back to him."

I suppose that this boaster intended that I should believe that he was so much superior in point of ability to my friend that when one of the latter's patients had a treatment from him he thereafter had a life patient. But knowing that my friend was not a four-flusher I was privileged to doubt the truth of the other part of his statement wherein he claimed to be successful in proselyting his patients. I can well believe, however, that he persistently exercised his wiles, tricks and blandishments in an effort to do so.

In insurance parlance the agent who knocks other companies, and tries to get policy holders to substitute their policies for one in the company he represents, is called a *twister*. We have, unfortunately, osteopathic twisters, and their methods of operation are fairly well known to most of us. The twister, having the patient of a colleague in his office, makes an extra effort to discover something overlooked by the preceding physician, and whether any real thing is found or not he makes it appear that such is the case. He expresses surprise that so patent a thing has been overlooked. By feigning extraordinary interest, by devoting more time than he usually does to his own patients, and by bringing out and exhibiting his box of tricks, he seeks to give the impression of super wisdom, ability and skill. All of which, to say the least, are despicable things to do.

I wonder how many of us have been the victims of such conduct on the part of colleagues. Not many, I hope and not often; for I am persuaded that the majority of our profession are fair, honorable and even generous in their relations with their fellows. But there are enough who act in the opposite way to make an admonition worth while. Quite aside from the matter of principle involved I would say, be fair and courteous to your colleagues. As a matter of policy it will pay. It should be remembered that the patients of osteopaths, as a rule, are unusually intelligent and are likely to see through the tricks of the twister. The twister and the boaster will often find their devious tactics to be boomerangs.

The world is big. There are plenty of people in it who need osteopathic treatment to keep all of the osteopaths more than busy. Do not make a drive for the patients of a fellow practitioner. Do not try to disintegrate his practice. Get a clientele of your own. Thus you will not only be doing well for yourself, but you will be helping to spread the influence and establish the good name of osteopathy.

Miami, Florida. Aug. 7, 1918.

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