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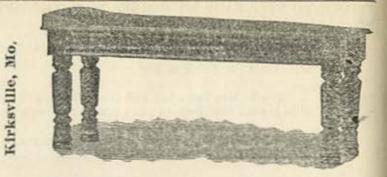
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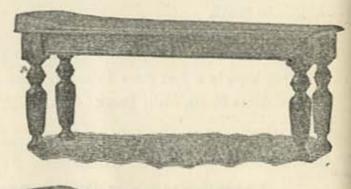
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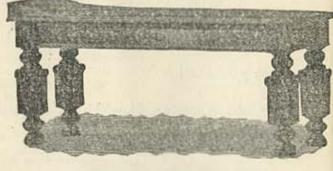
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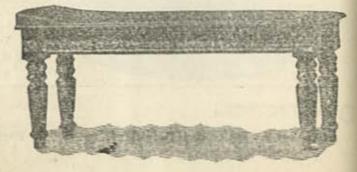
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OF THE ATLAS AND AXIS CLUBS.

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MAY, 1905.

NUMBER 9

#### HEREDITY.

DR. C. H. HOFFMAN, KIRKSVILLE, MO.

M. Ribot has defined heredity as the biologic law, according to which living beings tend to repeat themselves in their offspring, and to transmit to them their properties. Two great laws seem to govern and explain heredity; the law of conservation of the ancestral type and the law of evolution. The species possesses a unity, or rather an individuality; and it preserves its fundamental characteristics through the ages in such a manner; that men of all times and all countries resemble each other. The likeness however is not perfect, certain modifications have occurred, and it is quite certain that the civilized man of the nineteenth century is not identical with primitive man. An evolution has taken place. Its significance will be better comprehended if it be remembered that the species is ruled by the very laws that govern the individual. If we consider a being from birth up to advanced old age, we observe in it the working of the two laws just mentioned. It is clear that the adult individual is no longer the same as in his childhood, and that he will still continue to alter as he advances in years. Nevertheless, in spite of these continued changes, the individual type has been preserved, and in the midst of successive transformations the inevitable foundation which maintains the personality of the individual remains. The species is neither more or less modifiable. It evolves as well as the individual, and also passes through the three phases of growth, climax and decay. The species is preserved through the ages, and it maintains through heredity its resemblance to itself just as personality preserves that of the individual. If we consider inferior beings, heredity seems much more perfect. But this is, in reality, an optical defect of our minds, if the expression be allowed. It is harder for us to grasp that which constitutes personality than to perceive the common traits. Consequently our attention goes to the latter, and thus, because we do not see the differences, we believe that all individuals are identical and remain so. In superior beings, and particularly in man, we are in the habit of looking for the dissimilarities.

On closer scrutiny, however, it is easy to convince one's self, that the resemblances are always preponderant; the common characteristics are more numerous than the points of difference. Consequently, it can be said that heredity is the rule and non-heredity the exception. The greatest naturalists and the most celebrated philosophers have taken up the study of heredity, and have endeavored to explain it. But most of their theories belong to the past. The gemmules of Darwin, and the plastidules of Hæckel are now well forgotten. The ideas of Weissman, alone, deserve our attention, although they have been vigorously criticised.

Weissman established a radical difference between the reproductive and the other cells of the body. The former are eternal; they do not die, and thus they assure the perpetuity of the species.

This statement which may at first seem fantastic, finds support in the study of unicellular beings. Amœba perpetuate themselves by fission. It is not exact to say that one animalcule has given birth to another. There is neither mother nor daughter, but there are two sisters. Amœba are collateral beings and the amœba of the 19th century is the same as the one which existed at the beginning of the world. If perchance a few amœba die, or the pool in which they live dries up, their death is merely a matter of accident.

Nothing in the evolution of this protozoon doomed it to death. Natural death for it does not exist. The same logic may be applied to the generation of the cells of higher animals. The only difference is that they produce two classes of cells; cells whose function it is to maintain the life of the species, and which are consequently immortal, and cells that will constitute the body, the soma, and are therefore destined to die. The theory of the continuity of the germinal plasma explains perfectly the preservation of the specific type. But Weissman pushes his theory to its utmost limits and erects an impassible barrier between the somatic and the generating cells. He does not admit that the former may have any influence upon the latter, and consequently denies the transmissibility of acquired characters. At this point we must make a distinction which to us seems to be of fundamental importance. Acquired characters may be of two kinds; they may be accidental and therefore not transmissible; or they may be due to functional modifications, and then they are hereditary. This distinction leads us to the following new conclusion: Heredity is the transmission of functional but not of anatomical modifications. Those who deny the transmissibility of acquired characters generally cite the Jewish race. For more than three thousand years circumcision has been practiced among them, and yet the children continue to be born with foreskins. In the same way the young of certain dogs whose tails and ears have been clipped are born with their appendages developed just the same. On the other hand, let us consider a functional disturbance. Nothing is so instructive in this respect as the famous experiment of Brown Sequard.

If the sciatic nerve of a guinea pig be cut the animal becomes epileptic. If it be mated and brings forth young, these will also become epileptic. What is it, then that has been transmitted in this case? Is it the mutilation? Not at all. The sciatic nerve in the offspring is quite normal. It is the functional disturbance alone which has been fixed by heredity. As the development of an organ is regulated by exercise of that organ, it is conceivable that transmitted functional modifications may be accompanied by anatomical alterations as a consequence. Suppose for example, for a man to be gifted by heredity, with

superior intelligence, he will come into the world with particular aptitudes which will call forth an unusual development of the cerebral cells. In other words, it is not because the brain is highly developed, that the intelligence of the individual is remarkable, but the anatomical centers which serve as the substratum of the function have attained an unusual development because he has inherited a superior cerebral power. Our conception is also applicable to congenital malformations. Those resulting from accident-for instance, amputation by the umbilical cord-are analogous to acquired traumatic lesions. They are transmitted. Those produced by functional disorders, and those representing an arrest or an excess of development, or a return to some ancestral form, are transmitted to a certain number of generations. The ideas just expressed are nothing more than the application of the great law that the function precedes the organ, and explains, directs and regulates its development. Functional changes alone are powerful enough to modify the conservative role of heredity. To sum up we admit that the germ plasm goes through the ages without manifesting any tendency to modification. It preserves the individuality of the species. The somatic cells on the contrary undergo the influence of evolution. They are effected by external agents, and reacting in their turn on the germinal cells, give them a new direction. They tend to modify the primitive type. After the preceding consideration, again taking up the two great laws already offered as accounting for evolution, we can say; the law of conservation of the ancestral type finds its explanation in the persistence of the germ plasm, the law of evolution finds its explanation in modification of the somatic cells.

Accidental changes are not transmissible because they reach the somatonly. Fundamental disturbances are hereditary when the somatic modifications they induce react upon the germinal cells. If, in the last case, anatomical changes appear, it is because the development and the structure of the organs are governed by the functions of which they are the material substratum. It is, we believe, in this way that heredity can be understood, and that a satisfactory basis can be found for the two laws on conservation and evolution by which it appears to be governed.

Role of the two generators. In superior beings heredity is dependent upon two factors. Theoretically, according to the data of embryogeny, each cell of the new born animal contains the same quantities of male and female chromatin. Accordingly it would seem that the two generators must influence the product in an equal degree. As a matter of fact, the results are not so simple. Neither the physical nor the moral resemblance is an average. One of the parents exerts a preponderant influence. Several hypotheses have been advanced to explain this result. Orchansky claims that the parent nearest maturity imparts its sex and gives its likeness to the offspring. It is easy to raise objections to this theory. It is, however, sufficient to remark that in twin pregnancy children are frequently of a different sex. This fact may readily be explained if we accept the opinion as entertained by breeders. Ac-

cording to them fecundation gives a male or a female according as it occurs at the beginning or end of the catamenia. If the twins are not of the same sex it is because two eggs have been fertilized at two different times. Among the disorders which, without doubt must be attributed to the collaboration of the two parents, those due to consanguinity deserve attention. It is a matter of common knowledge that marriages between relatives give bad results. Such unions are often sterile or the children suffer from malformations, polydactylism, albinism, pigmentary degenerations and especially from deafmutism. But this is not always the case, and in many instances children born of such marriages have been perfectly normal. As a matter of fact, the effects of consanguineous marriages are to be explained simply as the summation of common characters. As they belong to the same family, the chances are great that the parents possess the same characteristics and the same physical or moral defects. They may be slight in each one of them, but they add themselves and increase in the descendants, as they are not corrected by different defects or qualities. We contend then that marriage between relatives will give good results when the pair do not possess analogous defects. Otherwise the least defect may be considerably exaggerated in the offspring. Consanguinity must be regarded as cumulative converging heredity. The same remarks apply to marriages formed between individuals of the same social class, and consequently having the same aptitudes, tastes and tendencies. It is a social consanguinity which may be compared to family consanguinity. The results are evidently analogous. Heredity fixes and exaggerates various defects, but natural selection interferes sooner or later. It counterbalances the retrogressive effects of social selection, and ends in sterility of these degenerate families. The influence of the father is not alone felt by the ovum he has impregnated. Individuals born later have been known to resemble the first generator in some particulars. Impregnation of the mother, as the phrase has it, has taken place. All breeders know that a bitch fecundated for the first time by a dog of different race gives birth in the two successive litters to young resembling the first father, although the second impregnation was by a dog of the same race as the mother. Cases are on record of women of the white race, who also having had a child by a negro, have subsequently and as the result of intercourse with a man of their own race, given birth to children on the bodies of which a few black pigmentary spots could be seen.

There is a case of a man belonging to a family in which for several generations all the males were hypospadic. This man married and had three hypospadic children. After his death his wife remarried and had four children, all of whom were hypospadic, although her second husband was perfectly formed. These four children had in their turn eleven children, only one of whom suffered from hypospadia. The structural defect transmitted as a result of the maternal impregnation had affected, it appears, her organism less deeply, since it showed a strong tendency to disappear. These facts have such a mysterious aspect that certain writers unable to understand them have found it easier to deny their real existence. Those who have tried to explain them have advanced three theories; one of them supposes that an imperfect fecundation of a few ova still in the ovary takes place at the time of the first fertilization. Another admits a perfect fecundation and moreover, supposes that the ovum waited for conditions more favorable to its development. These two hypotheses are evidently not based upon any known facts. It seems more rational to admit an impregnation of the mother by the foctus. The latter has inherited the qualities of the father, its cells have received from the father a nutritional and functional direction manifested by a particular state of the fluids. As a consequence of the continuous changes taking place through the placenta, certain soluble products reach the mother and impart to her various functional characters resembling those of the father. After all, the theory does no more than extend to the several forms of impregnation the results derived from the study of syphilis. All acquired characters will in this way be hereditary and pass from generation to generation indefinitely, until a time arrives when a character long since modified, or even lost, reappears without ascertainable causes. This is what is called atavism. Darwin has collected a large number of examples establishing that certain characters may slip several generations. We shall again refer to them when considering nervous variations.

#### HEREDITY OF NUTRITIVE DISORDERS.

Among the functions whose modifications may influence heredity, the one most general must first be mentioned, nutrition. We all know the part hereditary modifications play in the development of arthritis and scrofula, and we have shown how a light taint in the parents grows worse in the descendants. The fact is striking in arthritic persons, and it easily admits of an explanation. When arthritism develops under the influence of external causes, the latter influence adult cells, which are endowed with a well defined mode of activity. The modification therefore is to affect conditions of many years standing, whereas disturbances transmitted by heredity effect young individuals not vet possessed of a nutritive direction, and therefore readily influenced by the impressions they receive. In this way we adopt to the study of heredity the conditions which are the very basis of children's education. In both cases young cells yield easily to influences which they would resist in their adult state. In considering a family of arthritics we find in certain of its members tendencies which may alternate. Among its most general manifestations, athritism includes gout, eczema, nervous affections-from neuralgias and hemierania to hypochondria and fatty diabetes, gravel, etc. These various disorders may coexist in the same individual, but more frequently they alternate in himself or his descendants, for instance, a gouty father may have an arthritic child. In other words, an arthritic son suffering in his youth from hernicrania, becomes arthritic when about fifteen, around thirty or forty he is afflicted with gout and later on dies of cerebral hemorrhage. Heredity is analagous when the child suffers from the same disorders as the father, when for instance, they are both arthritic

THE BULLETIN.

or gouty, it is called homologous when the manifestations are different. Arthritism is the inheritance of civilized people and of the upper classes. Most individuals gifted with a superior intelligence are tainted by it. Geniuses are often sad, fantastic and one-sided; their cerebral aptitudes have developed unequally; they suffer from deficiencies and disorders which at times border upon insanity. In such subjects heredity may continue to emphasize the superior qualities. Much too often it assumes the predominance of the cerebral disorders and ends in mental degeneration or insanity. We shall return to these questions when treating of nervous heredity.

The second diathesis, scrofula, is found in children born of parents in bad health, suffering from some chronic intoxication or infection, alcoholism, syphilis and especially tuberculosis. They are weaklings with flaccid muscles, long and silky eyelashes, hypertrophied tonsils and wide nose. During their first years they suffer from spurious adenopathies. In their youth they are in danger of falling a prey to pulmonary tuberculosis which soon generalizes and prematurely ends their lives. In this way the races of degenerates disappear according to the great laws of natural selection.

The disorders of nutrition, defined by chronic intoxications frequently manifest their influence in the offspring. Children of dipsomaniacs are badly developed and present numerous stigmata. Their size is below the average. The nervous system is rudimentary and the sexual organs are small. In addition to this infantilism, better marked malformations may exist such as cranial or facial assymmetry. If we pass from this study to that of the functions we shall note numerous disturbances of the nervous system. Anæsthetic and hyperæsthetic spots are observed, as well as exaggerated reflexes, sleep may be disturbed by nightmares, terrors and frequently by urinary incontinence. The disposition of the subject is sad, morose and sensibility is exaggerated. Intelligence is often precocious and may seem to announce great intellectual qualities. But an arrest soon occurs, or at least a lack of equilibrium, weakness of attention and will, and some oddities of ideas and behavior will be noticeable. At times, however, a few aptitudes persist, particularly artistic talents. But even in this case the asthenia of the nervous system expresses itself in a deficient moral sense and in bad and irresistible impulses. Among these vicious impulses dipsomania takes a distinct place. It is frequently said that an abuse of liquor leads to alcoholism; but it is generally the reverse which is true. The first excess is only the occasion which sets in motion a predisposed nervous system. We must hasten to add that heredity is not inevitable. When the son of an alcoholic is preserved from the influence of occasional causes, the development of dipsomania is retarded, or even distinctly prevented. What we have just said of dipsomania, also applies to misdemeanors, thefts or crimes. Of late, moralists dwell upon the increase of child criminality. If antecedants are looked for, it is found that most young criminals are sons of degenerates, and particularly of alcoholics. On the slightest provocation the system reveals these innate aptitudes. Several less serious disturbances have

the same pathogenesis. Convulsions, which are too readily looked upon by parents as common reactions, take place chiefly in tainted children on account of a parasite, an intestinal worm or an infection like pneumonia. In certain instances the disorder may become serious. The infection may show itself in the predisposed nervous system, particularly in the spinal cord and provoke an infantile paralysis. In other cases an accidental cause may determine the appearance of symptoms of hysteria, especially of epilepsy. In 80 out of 100 cases, epileptics are born of parents tainted with alcoholism. The other chronic intoxications are equally apt to give rise to morbid disturbances in the descendants. First of all saturnism may be cited. When the mother is poisoned, abortion is the result, when it is the father accidents are no less frequent as is shown by the following figures taken from C. Paul, out of a total of 141 casesthere were 82 abortions, 4 premature births and five stillborn children. Of the 50 children born alive twenty died in the course of a year. 15 between the first and the third year and 14 were still living. When they survive such children suffer from various morbid manifestations already referred to, frequent convulsions on the slightest cause, various degenerations and serious nervous disorders, such as epilepsy, imbecility, idiocy, etc. We need not insist upon the other intoxications of whatever nature the intoxication may be, when degeneration reaches a certain degree, sterility supervenes, thus inferior and defective races disappear. The consideration of intoxications leads us quite naturely to that of infections, since it is through their influence that the microbes act. It is a well known fact that microbes pass from the mother to the fœtus through the placenta, and also that less frequently the infection is communicated by the father.

In the cases where the pathogenic agent does not traverse the placenta, the product may present a series of accidents called para-infections, studied particularly in syphilis. It may be first a special condition sometimes causing the death of the fœtus. Hence the frequency of abortion. If it comes into the world at all the child is feeble and has a bad constitution. It develops slowly, teething is retarded and defective; at times the number of teeth is below the normal or a supernumary tooth introduces itself between the two superior incisors. The teeth are dwarfed; the superior median incisors frequently suffer a particular deformation described by Hutchinson, namely, a notched depression in the cutting margin of the teeth. The bones are poor in lime, salts, other parts of the organism are also affected, and deafness frequently exists. With the dental alterations they constitute the triad of Hutchinson. Physical and intellectual development is slow, infantilism is frequent, the genitals remain rudimentary, puberty is retarded, intellect is feeble, sometimes nil, convulsions are frequent. Besides the various stigmata mentioned, congenital malformations may be observed, such as spina bifida, harelip, hydrocephelus, microcepalus. It is principally maternal heredity which engenders the disturbances just mentioned. Paternal influence shows itself preferably in abortion. Out of 103 cases of pregnancy due to male syphilities only 19 children sur-

vived-43 of them died in infancy and 41 in utero or were aborted. We may be comforted by the fact that syphilis is slowly decreasing and that it will ultimately disappear. It is generally admitted that after a treatment of two years there are already some chances of having healthy children. After three years it is almost the rule. Children of tubercular parents do not fare much better than those of syphilities. They present malformations, as if the respiratory disorders of the parents reacted upon the developments of their lungs. Their respiratory capacity is below the average and their lungs are often affected with emphysema, an alteration which has long been considered as congenital. It is probably on account of this pulmonary condition that the thoracic cavity develops badly. Finally, in these, as in all children born of diseased parents, the following stigmata may be observed-slow teething, insufficient ossification, infantilism, defective development of the genital organs, of the circulatory apparatus and particularly of the nervous system. When the parental infections do not go so far as to cause stigmata or lesions, they frequently impart nutritive habits to the cells of the child and alter the chemical compositions of the fluids. It is in this manner that predispositions and family immunities are produced. If we leave aside tuberculosis, which we have already considered, we may mention a large number of infections of remarkably frequent occurrence in certain families. Such is the case in diphtheria, and especially in erysipelas, which in 13 out of 100 cases is a family disease. The child inherits from one of the parents a particular mode of nutrition, rendering the organism favorable for development of a special microbe. These cases must not be regarded as similar to those in which one of the parents is diseased and begets a child incapable of offering resistance to the first microbe it chances to meet. In the former case, the pre-disposition is specific; in the latter it is general. Conversely, heredity explains certain immunities. It is justly said that infections work havoe when they reach a population for the first time, Such was the case with measles in the Farce and Fiji Islands. This disease is innocent on the European continent, because their ancestors have transmitted to them a part of the immunity they acquired. But these facts have slowly been evolved through long ages. It is relatively difficult to understand their mechanism. Let us rather consider what takes place when immunity has just been acquired by the parents.

The first question is: What is the respective role of the two generations? Let us begin with the simplest case. The mother suffers during gestation from an infectious disease. We may admit that the protective substances formed in her system pass through the placenta and confer a certain degree of passive immunity upon the product. Thus a child born of a mother who has had smallpox during pregnancy has acquired immunity from this disease. If a woman be vaccinated just before the end of gestation, the child will for a certain length of time resist the smallpox virus; but this immunity is feebly marked and does not last; moreover it is not a constant result. Analogous facts observed upon animals inoculated for symptomatic anthrax or hydrophobia complete the proof of the existence of inoculation, but they also demonstrate that the immunity thus acquired is not well marked and is of short duration.

(To be concluded next month.)

#### COMPARED THERAPY.

(A paper read before the E. I. O. A. Mt. Pleasant, Iowa, April 8, 1905.)

DR. J. S. BAUGHMAN, BURLINGTON, IOWA.

In therapy or therapeutics is considered the discovery and application of remedies for diseases, curative. In other words, it is the discovery and application of a principle, or thing discovered which when applied caused normal body functioning where abnormalities and diseases previously existed.

From the writing of Homer's poems, prior to the advent of Hypocrites the remedial agencies were thought to be necessarily of a mysterious nature. The application was made by rubbing on, or taken internally. This same idea holds with a large number of our good people to-day. To be effectual it must pass through the stomach or served by inunction. Why not? The regular method is inunction, injection or by dosage.

It was this falacious idea with its multitude of failures that caused Dr. A. T. Still, the founder of our science, to stop and think. Life to him was worth more than all the exploded theories to be found between the lids of medical lore. He studied nature and got nature's answer to his queries. He tells us that where there is perfect circulation there is perfect health; that uninterrupted nerve force means perfect circulation; that the laboratory of the body within is all sufficient at all times where nerve force is unimpared and the life fluids and gases of the body obtain.

With these hypotheses before us we shall consider the "regular" method of treating a few of the most common diseases, and compare the same with the osteopathic method, and note results.

Chronic gastritis or catarrh of the stomach is first on our list. We take the chronic form because the acute form is obviated by the leaving off of a few meals. With the chronic form such is not the case.

Etiology or cause, (1) dietetic, improperly prepared foods. Persistent use of certain articles of diet, too much fats, foods containing too much of the carbohydrates. (2) Anemia, chlorosis, chronic tuberculosis. (3) Local conditions. (a) the stomach itself, as cancer, ulcer, etc. (b) conditions of the portal circulation, as in cirrhosis, chronic heart disease and certain chronic lung affections.—Osler.

Any cause which will produce continuous moderate irritation to the mucus membrane of the stomach is capable of producing chronic catarrhal gastritis. Chronic gastritis may be secondary to primary disease elsewhere, especially mitral disease of the heart and interstitial hepatitis.—Tyson.

Local irritation, weak heart or disordered liver, then, are the primary causes, according to these distinguished authors. That a disordered liver might fail to elaborate the blood as rapidly as it should and thus produce passive congestion is quite probable, or that a weak heart may fail to bring to the stomach walls pure blood fast enough is likewise true, but if these distinguished writers would go back a little farther and locate and remove the real trouble, we are

inclined to believe that many of the patients who have become chronically ill in this particular would have been well without the aid of the following treatments advised.

Treatment: "Medicines, such as are supposed to stimulate the gastric secretions, bitter tonics, such as quassia, gentian, columba and strichnia are given. Of these strichnia is supposed to be the most powerful, though none of them have probably any very great stimulating action on the secretion, affecting the appetite rather than digestion."-Osler.

Dieting the patient is advised and with this waters such as Carlsbad, Ems.

and Wiesbaden are especially recommended.

It will be seen here then, according to authors quoted, that the cause for the catarrhal condition of the stomach is either local, due to the kind of food taken, or is due to a weak heart, disordered liver or pulmonary trouble.

From the inactivity of the liver, it is true, we may get a venous engorgement and thus a passive congestion, or, from the effects of a weak heart, we may have a lack of proper nutrition to the stomach itself, but as the blood supply is direct from the eccliac artery, and it very short, from the abdominal aorta, it is not likely that the primal cause of gastric catarrh can be laid wholly at the door of a weak heart. Constant overloading may tax the walls of the stomach and in time produce an irritated condition but where this condition becomes chronic, it is our opinion that a more probable cause will be found in the dorsal region of the spinal column. Here, from the 5th to the 9th dorsal, we have the origin of the nerves which control the blood flow to the stomach. A luxated condition of a vertebræ or the slip of the end of one or more of the ribs may cause an impingement of the nerve fibers to such an extent as to decidedly interfere with the nutrition to the stomach. Again, the drop of the ribs in this region may change the tension of the diaphragm, as is taught by Dr. A. T. Still, and in this way, interfere with the working of not only the stomach but that of the liver, the heart and the pancreas. This being the case, no end of trouble could come from such a lesion, and yet neither the heart nor the liver be the primal cause.

Now to remove the cause, if it is the weak heart, it will be necessary to treat it, and for this we are advised to use either "strichnine, nux-vomica or nitroglycerine," depending on which of the poisons seem best suited for the purpose. If it is the liver, then the "salines, alkalines," and the usual run of laxatives. Is it possible to administer these irritating drugs without interfering with the already irritated stomach? Is it possible to give any remedy. no matter how mild, that would in any way affect the liver action without irritating a stomach where gastritis prevails? Again, the stomach has failed to functionate as it should, will any amount of drugs poured into it in this condition enable it to secrete more of the gastric juice? Dr. Osler says, "strychnine is the most powerful stimulant but it is doubtful whether it does anything further than increase the appetite."

Now what does the osteopathic physician do? In the first place he is

taught to look after the nerve force governing the blood flow to the stomach, to see if in that region, 5th to 9th dorsal, there is any osseous, ligamentous or muscular lesion which might interfere with the normal nerve impulses, and thus derange the blood flow to the stomach. If the liver is found inactive, this is taken into consideration and the work directed to relieve the trouble. If a weak heart, that is attended to in like manner and without interfering in the least with the working condition of the stomach. Every move made by a skilled osteopathic physician is in favor of nature's effort to free itself and once the parts involved in the lesion are freed, nature resumes her work, as has been demonstrated and is being demonstrated every day.

Where the digestive fluids are normally secreted, we have, as a result of digestion, a vitalized condition. That is, the digested foodstuffs, prior to their passing through the villi of the intestines, contain white blood corpuscles which have a movement of their own; it contains immature red blood corpuseles: also the elements of fibrin. These elements are to be found only in the living blood outside of the digested foods.

The best chemists in the most improved laboratories have not as yet been enabled to produce the above results by artificial digestion. If such is the case, how can our medical brethren hope to do anything in the way of medicine which can be appropriated to the body without first having to undergo the action of the digestive fluids? If it does not undergo the action of the digestive fluids, then the remedial agent does change the digestive fluids. In either case, they must call for some of the vital forces of the body before they can hope to appropriate to the body the aid intended.

The fact, however, still remains, that all drugs of mineral nature are excreted just as taken and do not have any place in body-economy. It is for that reason that so many patients have become chronically ill with gastritis. For that reason so many who are ill with chronic gastric catarrh have a disordered liver and a broken down heart. The continued drugging of the patient leaves no alternative.

That there may be a weak heart with stomach disorder or that we may find in connection with stomach trouble a disordered liver, we do not question. This is often the case. Is it probable, however, that either one or the other or both are the primal cause of the disordered stomach? We are inclined to think that as vaso dilator fibers make their exit along the entire cerebrospinal system, and as the vaso constrictor fibers are to be found from the second dorsal to the second lumbar, a lesion in the dorsal region, as stated above, affecting the sympathetics and through this the nutrition to the stomach, is the foundation of our gastric disturbances. A badly nourished stomach means poor digestion. This means fermentation and the absorption of poisons resulting from these undigested foods,

Again, the lesion above referred to can result, as it often does, in a change in position of the ribs and in this, result in abnormal tension of the diaphragmor in a relaxed condition of that muscle, and as this would affect the blood flow to

the heart, as well as from the heart, we can look there for trouble such as venous engorgement to the digestive tract, the spleen and pancreas, thus affecting the secretory system to such an extent as to almost swamp the liver cells in their functioning by the poisons thus thrown on this organ. Such has been our experience, and such has been the experience of others, no doubt, as has been proven by the correction of such lesions followed by good digestion, strong and steady heart beat and a healthful glow ing color to the check of the "incurable" seeker for health.

Typhoid fever. Cause—Bacillus of Eberth, bad ventilation, etc. Treatment. Dr. Osler says in his practice medicines are not often used, a large majority of his cases never receiving a dose. Medicinal antepyretics are used far too often and rashly in typhoid fever. The preliminary calomel purge, so often used in the eliminative treatment, is unnecessary. He recommends careful nursing, and cold or sponge bath.

Graves states that patients who escaped the active purging treatment before being admitted to his hospital get through the disease with little or no tympanites. He recommends the Brand Method, cold bath.

Tydon says, "antipyretics, including antifibrin, phenecitine and others of the same class which act by producing copious perspiration are no substitute for cold baths, for while they reduce the temperature, their effects are temporary, and their continuous employment too depressing to the patient.'

"Treatment of special symptoms:" the bromides, spirit of chloral, Hoffman's anodyne are recommended where cold bath cannot be given. In meningial symptoms he advises leeches applied to the temple and back of ears, as quieting follows such treatment. There is no specific for this disease as yet. The only helpful remedy is the cold bath to keep down the fever."

The primal cause, as given by these distinguished authors, is the Bacillus of Eberth, located in the intestinal tract. No matter how well and strong the patient, he is ever predisposed to this dreaded disease.

That some are immune in an epidemic is without question. Is then the presence of the bacillus a proof that it is the primal cause? Is not a culture media necessary before this germ can find a lodging place? What is the nature of this defective spot in the alimentary tract? The inactivity of the bowel at which this inoculation occurs is there for some reason. This inactivity permits of a gradual extension of the lumen of the bowel and a continued filling up of fecal matter so that the inner surface of the bowel becomes paralyzed by the hardened condition of the impaction and thus affords suitable soil for the bacillus of Eberth. As stated before, there is a reason for the prevailing condition and that is interrupted nerve force. This interference results in imperfect circulation to the part involved and as a result we have the inactivity of the bowel which is followed by a constipated condition of the patient and later by impaction of the bowel which results in soil suitable for the germ. Once having suitable soil to work in, it is but a matter of a short time until the germ penetrates the inactive bowel, where its deadly poison soon finds its way into

the circulation. This accomplished, the impulse is transmitted to the medulla, thence to the heart and as a result we have a more rapid heart beat. The lumen of the blood vessel is diminished by the effects of the toxins thus producing greater friction in the peripheral circulation and this added to the extra combustion necessary in griating the blood, gives us a rise in temperature, which, by the way, is but physiological as it is nature's method of ridding itself of the poison in the system.

The predisposition, or primal cause, then, is not the bacillus, so much discussed, but the condition which permits of the accumulation of a suitable soil, the interrupted nerve force, and consequent lack of circulation to the part. This being the case, we do not wonder that our medical brethern have thus far failed to find a specific for typhoid fever. Nor are we surprised that their only perceptable influence with this fever has been in resorting to the cold bath. The real cause of the condition still remains and they are battling with secondary cause, or the result of the primal cause. This the osteopath sees to on his first visit, frees the nerve force re-establishes circulation and the pure blood, nature's germicide, carried to the bowel from the healthy side without irritation, recuperation of the patient at once begins. The fever, so much combatted is of secondary consequence, unless the patient is too far gone. In such cases there are times when a wet sheet pack or cold bath might be resorted to with advantage. This, however, is the exception, not the rule.

Age.—Let us note the age at which we find typhoid fever most prevalent. In women from twelve to twenty-four, in men from fourteen to thirty.

Here, again, we have a key note to the fact that the osteopathic reasoning for the primary cause is correct. At this age we have the most active period in man's life; at this age we have just the right condition of the articular surfaces of the spinal column to admit of a free movement one on the other, so that it is an easy matter to luxate any one of them and further that the surfaces thus slipped are of sufficient hardness to hold them in this luxated condition once they get beyond their true bearing. This may be one vertebra on another or it may be the relation of the rib to the facet of the vertebra at fault. In either case it might interfere, as it frequently does, with the nerve impulses, consequently with the nutrition to the parts or the viscus involved.

In children this is not the case so often, as their bones do not ossify until about the period above named, and the luxations do not occur because of the freedom of movement, and the freedom of these parts to resume their natural position. In older people we have not the same activity, hence not so much likelihood of such luxations. Again, in the older persons we find a stronger ossification, more compact spine, so that in this there is not so much likelihood of such luxation, and for that reason not so much of a predisposition to the "germ."

Osteopathy, then, is nature's method of handling this disease, and once the cause is removed, light treatment to aid in the climination of the poison through a greater activity of the excretory system and a better assimilation due

to better secretion of the digestive fluids, nature is again free to resume her work unmolested and the patient, instead of convalescing for a long period, is again able to resume his usual vocation. Often before the usual time the fever runs, or if the fever does run its usual course, the patient at once builds up avoiding the sequalse so common to typhoid patients.

Pneumonia.—This is a self limited disease, which according to Osler, can not be aborted nor cut short by any known means at the command of the medical profession. "There is no specific treatment for pneumonia. The young practitioner may bear in mind that patients are more often damaged than helped by permiscuous drugging which is still so prevalent."—Osler. Under special treatment he advises bleeding, i. e., venesectional, this, he says, is more often used late in the disease than early.

Toxemia.—"To combat it," he says, "is our chief weakness. We have as yet no specific, either drug or product of the bacteriological laboratory which safely and surely neutralizes this poison."

Here again the osteopath looks for a lesion affecting the blood flow to the lungs. There must be a predisposing cause. That cause may be a contractured condition of muscle tissue in the upper dorsal region due to a cold. The contractured condition may be due to an injury resulting in a luxated condition of a vertebræ or rib, either of which may affect the nerve force, or the muscle tension from the cold itself may be, as has often been the case, sufficient to produce subluxations of sufficient importance to interfere with nerve impulses to the part, and in this way with the circulation. The lesion located, the physician, skilled in his work, should be enabled to make the correction and then directing his attention to the hyperesthetic condition of the lungs, case the patient by directing the blood current to other parts of the body, which is the osteopathic method of bleeding. This has often been done as has been evidenced by the popping eyes and flushed face giving away to a more restful expression, or even more from that of delirium to a calm and restful sleep.

While we do not wish to make reference to our own work, we are obliged to do so in order to bring before you osteopathic results as we have seen them.

Case 1.—Pneumonia, delayed resolution of 83 days standing. Patient had been sent to Florida for "recuperation." Had been there for three weeks when he called at our office. Physicians, the best that could be had, for he had means, and knew where to go to get the best medical service, told him "such a thing as starting a cough in delayed resolution was unknown to the medical profession." The patient was examined, and our attention given to what we thought the cause of the trouble. This we found in second and third ribs on the left side upward and back, while the side and body of the ribs rested heavily on the fellow below. Correction of the lesion was effected on second treatment, and patient commenced to cough and continued to do so more or less until evening at 9 p. m., when we were called to stop the cough, which we did, and patient rested until next day about three p. m. when he went out for a drive. The cough again commenced, and lasted until stopped at bed time to give patient rest. Patient

came to office next day for treatment and again commenced expectorating, after treatment, but could control the cough. From that time on, during the time under our treatment, patient grew rapidly stronger. This was for a period of three weeks. He then took a rest for three weeks, and again resumed treatment for two terms and is today a well man. Expectorent was of mucupurulent nature and showed pneumococi under the microscope. It is now three years since the first treatment was given.

Case 2.-Lady aet. 52, subject to bronchitis. Had just been up four weeks from a severe attack of pneumonia lasting three weeks was caught in storm at sea and much exposed which resulted in lagrippe complicated with pneumonia. Ten hours after the onset we were called to see the patient at 2 p. m. Temperature 102, rapid pulse, flushed face, flashing eye and very nervous. Much pain in chest, and over dorsal region, from 3rd to 7th inclusive. Palpation indicated the involvement of apices of both lungs. Muscle contraction in the region above mentioned was very pronounced. Pain in the arms and legs was significant in that it showed that lagrippe as well as pneumonia was to be com bated. Treatment was directed first to above region and then to the entire spine, thoroughly relaxing the cervical muscles and upper dorsal. Vibratory treatment was given to the intercostal interspaces as low as the 4th at sternal end of ribs, to quiet the cough. Patient was treated twice within two hours, again early the next morning and at noon and evening of the next day. The next morning, and on the afternoon of the third day patient came to the office for her last treatment. Saw her two weeks after this, she was well and felt better than for many years previous. Same nurse who was in attendance at her first sickness was with her this time and declared that in her ten years as an experienced nurse she had never witnessed such results. In osteopathy, then, we find what our medical brethren are looking for and what the people want -who have pneumonia.

RHEUMATISM-TYSON NAMES IT AN ACUTE INFECTIOUS DISEASE.

Etiology.—"Continued exposure to cold or damp, changes in temperature, lowered vitality, fatigue and overwork. Dr. J. K. Mitchell of Philadelphia thinks "the nerve centers are primarily affected by cold and that these primary disturbances result in errors in metabolism and the accumulation of lactic acid." This comes somewhat nearer the osteopathic idea, except that it remains for the osteopath to tell why the nerve centers are involved and how to remove that cause.

Treatment.—(regular medical).—"Medicines have little or no control over the duration or course of this disease, which, like all other self limited affections, practically takes its own time to disappear. To allay the pain opium may be given in form of "Dover's Powders" or morphia, hypodermically. In combination with the salicylates with the alkali, care must be taken to watch the heart during the administration of these remedies, since, if given freely, they are very depressing."—Osler.

Tyson follows with this statement: "Salicylic acid and salicylates of

THE BULLETIN

THE BULLETIN

one necessary condition of efficiency, and that is its constitutional impression in the ears occurs." Tyson, p. 72. dom obtained, or if obtained is of fleeting character until the peculiar ringing The aim in administering the drug is to relieve the patient but its effect is seldoses to be useful." Again he says, "which ever of the two is used, there is is not well borne in any shape. The stomach cannot tolerate it even in smallest says, "Salicylates treatment is not always successful and sometime the drug latter, because it is less irritating and more easily administered." Again he sodium are equally efficient. The former has been largely superceded by the

system is deadened to the sense of pain. The drug must be administered, in other words, till the entire nervous

sion that since he has spent all he had for medicine, he may as well try the ganutlet of all methods without help until he reaches, by chance, the conclusystem until his ailment becomes, as it often does, so chronic that it runs the well in spite of the remedy or so delude him by the effect it has on his nervous by our medical fraternity, at a guess, hoping to hold the patient until he gets affects respiration and may cause death. Yet these are the remedies advised much of an irritant. Effect on nervous system the same. In over doses often doses or at frequent intervals. Salicylates are of similar nature but not so Physiologically, salicylic acid is a heart depressor when taken in large

# OSTEOPATHICALLY, WHAT IS RHEUMATISM

nourishment. We know that in rheumatism the patient suffers pain. is perfect health and where there is uninterrupted nerve force, there is perin the joints, ligaments and muscles and of such severity as to be almost death fect circulation. The Old Doctor has told us that where there is perfect circulation there We know that pain is a cry of the nerves for freedom and

ation, absorption of these undigested foods, a continued nerve irritation and which interferes with the digestive tract. Result: fermentation, mal-assimiland other smaller joints are first involved. weakest at joints farthest from the heart, hence the hands, feet, ankles, knees carious nature, if continued. This is natural. At the articular surfaces of chronic neuralgia and in the deposit in the various joints of the body of a caland further irritation until the entire nervous system is involved, resulting in the body we have the poorest circulation, and, as we often find it, nature is tation thus produced is of sufficient consequence to cause muscle contraction vertebrae to hold it in that malposition once the slip is made? The nerve irrito admit of a free movement and just hard enough at proximal surfaces of the true that the osseous condition of the spinal column is in just the consistancy fever cases above mentioned, that this is the most active age in life? Is it not significance in this to you my fellow physicians? Is it not true, as in typhoid to twenty-five years and in some instances to thirty-five years. Is there any Age. - This disease is most frequently found in cases ranging from fifteen Why? First, we have a luxation

> our body make up is the only alternative. Especially is this true where mediand so hamper the eliminative powers that a deposit at the weaker points of a production of lactic and other acids which so overwork the excretory system cal treatment has been the rule.

affect the venous outlet and thus a passive congestion result. In either case it affect the nutrition to this portion of the spinal cord or it may be that it would where the nerve makes its exit, it may so impinge the artery at this point as to known in its acute form as neuralgia but later on as rheumatism. would result in such a lesion as to cause pain. This pain is more frequently A luxation of one vertebra on another may affect the nerve at the foramen

impulse, making comfortable and happy those who have been called "chronic follow? If such be the case, as by nature we must admit it is, then the osteoan over production is continued, that an over irritated nervous system would over irritation would produce an over production of acid formation, and, if alkaline. All muscle activity is such by the aid first of nerve stimulation and rheumatics" and who have for years sought relief, but found it not until naosteopath's knowledge of correcting the trouble, thus setting free the nerve pathic cause for rheumatism is established and the cure for it lies only in the circulation of blood to the part. This being the case, is it not natural that an in others so-called incurable, that osteopathy has made its record. ture's remedy, Osteopathy, came to their relief. It was curing these cases, as Physiologically, the active muscle is acid, while in a passive state it is

muscular contracture due to cold, but this contracture may resolve itself into understands his business. The different kinds of lesions depend upon the nanot necessary to injure the patient to make such corrections. correction of the lesion. Nothing short of correction will do the work. It is such a lesion as to involve the special centers as above mentioned. traced direct to traumatism as the primary cause. Some may be caused by ture of the injury and the location but in our judgment, a large per cent can be there is scarcely any pain perceptable, in others very slight, if the operator Massage treatment in these cases counts for nothing. There must be In many cases

stomach trouble, pneumonia, typhoid fever and rheumatism. In neither of these cases have the regular methods been found satisfactory to the medical such, answer. the already irritated mucus surface? when the alimentary tract is involved and these irritating remedies applied on ture it even continued in small doses, severe illness and oftendeath follow an over is named, that remedy, if taken by a well person, would be of an injurious natraternity. We have then named four diseases common in our practice. Namely-If this is the case in a healthy individual, what may we not look for They have no specific for either. In every instance where a remedy Let those, who suffer the pain on taking

are left sufficiently strong to recover from the attack ward him with a return of health and comfort since the recuperative powers ment and when the patient continues true to osteopathy it is as sure to renewness of life. Every treatment causes the patient to feel more vigorous. The exhilerating influence is felt for hours and sometimes days after the treat-How is it with the osteopathic treatment? Every treatment will give a

#### THE

### BULLETIN

OF THE ATLAS AND AXIS CLUBS.

#### SUBSCRIPTION, \$2.00 PER YEAR

W. W. VANDERBURGH. EDITOR.

MBS. ANNIE BROWNLEE, Reporter for Atlas Club.

Entered as second class matter, October 12, 1903, at the postoffice at Kirksville, Mo., ader act of Congress of March 3, 1879.

#### KIRKSVILLE, MISSOURI, MAY, 1905.

In the Atlas field notes will be found a very good suggestion from Dr. Paul M. Peck. Every osteopath should keep a scrap book. Many a valuable point is forgotten which if preserved in such a manner as the above might prove very valuable at some future time.

\* \* 4

Every Atlas and Axis osteopath should have Dr. Billie's anatomy. One is apt to get rusty if he has nothing more interesting to read than the general run of anatomys. This work is so arranged and worded that it holds your attention as steadfastly as does the author in the lecture room.

\* \* \*

Advertising in the Bulletin brings quick results. In our last issue we mentioned that we were short two file copies, the return mail brought us the desired numbers from Dr. J. A. E. Reesor of Toronto, Canada and Dr. C. W. Tanner of Mt. Sterling, Kentucky. We thank these gentlemen for their prompt response.

For the benefit of students not members of the Atlas or Axis clubs we will issue a supplement to the June issue. This supplement will contain Dr. Hoffman's article on Heredity and other valuable articles. If there are any of our members who would desire copies of this for distribution to their patients we can quote very reasonable prices on them. We will have several excellent articles and if there are those who prefer something which would be better appreciated by the laity than the scientific article Dr. Hoffman has so kindly loaned us, we will be glad to furnish them with something that will undoubtedly bring good results.

\* \* 1

Are going to Denver? Every Atlas and Axis osteopath who can afford the time should go. If you are going, read Dr. Chile's letter in this issue and put your shoulder to the wheel. Every O. O. A. meeting should be an Atlas and Axis reunion. There can be no better way to promote interest in the Club than to hold an annual banquet. There are many points that should be brought up at this time. Among them the question of field dues should be discussed and

if possible some steps taken that would bring the field and student members into a closer understanding of their duties to each other. We shall endeavor to get a committee appointed from the active members and hope that in this way much good may be accomplished.

\* \* \*

The following extract is taken from a letter written by Dr. E. L. Kalbfleisch of Newton, Kansas:

"These are my reasons for not paying up and going ahead. It is not right that we of the field members should be asked to pay any money into the Club unless they are building. None of the Greek letter frats make such demands. Why should I pay my money in just to keep the crowd there in parties and dances? When we were there and the Club was just started, we had a lot less members than you have now and the Club grew without field support. We had everything to buy new, but we dug down into our pockets and paid the bills. And now when the Club is well established, and its more of a question as to who you will have as members than it was at first and yet they need money from the field. No I do not think that is right and I know that if it should ever come to a vote you would see that by far all field members would agree with me. As I said in the start no other frat ever makes such demands. Of course the Club will live and I hope do well, but it will never have the support of the field members so long as the tax is in force. As you know, this is just my view and may not count for much. I see that one issue says pay up or return the Club pin. Never will I return the pin for that was paid for when I paid my money the first night. It is very plain that the officers of the Club know very little of the effort that was made and the fight the early graduates had in starting the Club. Of course they can be very independent now, that they have none of the worry and work that we had, but I would have them know that they are now enjoying the fruits of our labor. At the start there were months at a time when we never had any sign of a party and the magazines we had were given us by members of the faculty and others that could and would do it. So you can see there is no justice in the matter and as there is not, I can see no reason why I should be forced into it. Understand, I have nothing but the best feeling for the Club, and its members, but I do think that this is an injustice and that it should be voted upon by all Atlas men."

Inasmuch as Dr. Kalbfleisch joined the Club the week he graduated, he can be excused for his ignorance of Club affairs at that time. We choose to believe it to be ignorance on his part for we can not believe he would willingly so distort the facts

According to the books of the Club, Dr. Kalbfleisch never paid one cent into the treasury aside from his initiation fee, so it is apparent how much he "dug out of his pocket" to pay the bills. Dr. Kalbfleisch thinks field members should pay nothing to the Club unless they are building, citing the fact that Greek fraternities require nothing of the kind and remarking that the Club existed for a time without field dues. Evidently he overlooks the fact that these

Greek frats do not support a publication.

The Atlas Club got along very well without field support before its field members became an expense to it, then it became necessary to collect dues and at the time Dr. Kalbfleisch went into the field the annual dues were \$2.00 but at the close of 1903 it was determined to cut it down to \$1.00 per year and has since remained at that figure. It may be a surprise to some of our members to know that the money received from the field pays only 60 per cent of the cost of publishingThe Bulletin. The local members are actually paying for the support of the field members rather than the field men!"keeping the crowd here in parties and dances." The question then resolves itself into whether or not the Atlas and Axis Clubs shall publish The Bulletin. It has been our belief that the field members desired a Club organ, however, this remains for them to decide. It was intended that the Bulletin should keep the field members in touch with the workings of our college, to post them as to the doings of each other and to enable them to exploit their scientific discoveries so that all might receive the benefit from them. Incidentally we hoped to present something of value and interest from the pens of various well known writers. How well we succeed in keeping The Bulletin of interest, of course, depends upon the support we get from the field. We have no means of knowing what you are doing if you do not write.

Dr. Kalbfleisch's statement that "at the start there were months at a time that we never had a sign of a party" is not borne out by the records of the Club. The minutes show that the first Club reception was held April 1, '99, the second one in June of the same year and at the regular meeting held November 29, '99, a bill was allowed for cigars, which had been consumed at a smoker. This was two years before Dr. Kalbfleisch became connected with the organization. The custom of giving Freshmen and Senior receptions, which was established in that early period of the Club's life, is still in vogue but they are given no more frequently now than they were then. The dances held in Atlas Hall are, as we have repeatedly stated, paid for by those who attend them, not one cent of the Club's funds being used for this purpose.

If Dr. Kalbfleisch's statement that, "its more of a question as to whom you will have as members than it was at first," be true, it certainly does not indicate that the standard of membership is lowered, as some contend.

We are not prepared to believe that "all the members of the field would agree with the Doctor on this proposition of tax." Certainly those who were members long enough (before leaving Kirksville,) to understand the workings of the Club will know that we must either discontinue The Bulletin or collect dues. However, if there are others of his opinion, we will gladly give them space to extend their convictions.

Dr Kalbflisch says, "never will I return the pin for that was paid for when I paid my money the first night." For once the Doctor is borne out by the records, he paid for his pin "the first night." Do you think, Doctor, that you are entitled to wear the emblem of the Atlas Club when you have been an expense to it since becoming a member and have never contributed a cent toward meeting that expense?

The Club will redeem the pins of those who wish to sever their connection with it. This is, of course, subject to the indebtedness of the one returning his pin. We cannot conceive of any one desiring to parade the emblem of an order from which he had been suspended for failure to keep his honest obligations to it.

That the gentlemen who organized the Atlas club ever depended upon the charity of the faculty or any one else for their reading matter, seems very unlikely to us. We know they did not when Dr. Kalbfleisch joined. To verify this we quote from the minutes of the meeting of April 29, '99: "Committee recommends that the Club subscribe for The Medical Record, Philadelphia Journal, American Edition, London Lancet, American Machinist Record, Chi Pop Science Monthly, Dietetic Gazette, Ladies' Home Journal, Munsey, McClure and Review of Reviews. Carried."

In conclusion, we will say that it is true that "the officers of the Club know very little of the fight the early graduates had in starting the Club." The "early graduates" left no record of a fight, and the history, prepared by Dr. Fred Julius Fassett and published the month Dr. Kalbfleisch joined the Club gives account of no such occurrence. We would recommend that Dr. Kalbfleisch read this history and learn more of the pleasant events associated with the beginning of the Atlas Club.

#### QUERY COLUMN.

The following questions and their answers have been given to us by Dr. Clark:

Q. What can be done to prevent nausea and vomiting in the early months of pregnancy?

Answer—(I) Dietetic treatment. Keep the patient away from the odor of cooking foods and restrict the diet to as simple a one as possible.

- Correct lesions that would affect the stomach or uterus that is the bony and muscular lesions of the back and ribs.
- Assist the uterus in getting out of the true pelvis by an occasional local treatment by which the uterus is lifted.
  - 4. Forbid or at least restrict the marital relations.
- 5. Give a lifting up treatment to the abdominal viscera with the patient in the knee chest position. The particular treatment is usually indicated by certain symptoms, but in some cases one has to go through the entire lest and even then is unable to overcome the disorder. Ordinarily when the uterus gets out of the true pelvis, which is at the third month, the nausea is relieved.
  - Q. When should the menses start after delivery of a child?

Answer.—In normal cases the menses do not start, if the mother nurses the baby, for at least six months but this depends upon the condition of the mother, that is, whether she is anemic or strong and upon the marital relations. Other features which are important in bringing on the menses would be subinvolution and being on her feet too much. Perhaps the most important one, however, is the resumption of marital relations too soon after delivery.

Q. Can pregnancy take place within three or four months after delivery of a child, if the menses are not present?

Answer.—I know of one case in which the patient had not menstruated, but became pregnant and was delivered in less than a year after her first baby was born so that my answer would be, that in some cases pregnancy would result whether or not the menses were present.

Q. Do you people at the A. S. O. advocate treating next to the skin? Answer.—That is advisable only in cases of hyperesthesia and fevers. We do not make it a practice but I believe it to be recommended in many cases.

Q. In a certain number of lesions along the spine a granular condition can be felt, just as if something were being crushed under the finger. What is the cause and pathology of such condition?

Answer.—The granular feeling along the spine is due to a thickening of ligaments.

Q. In a posterior condition of the dorsal region are the multifidis spinse and rotatores spinse muscles involved alike on both sides?

Answer.—If the curve is directly posterior the spinal muscles are affected alike.

Q. In correcting posterior lesions, should the fulcrum be placed immediately below the transverse process which is prominent or on it?

Answer.—I am of the opinion that in correcting such a lesion the fulcrum should be placed below the spine if in the upper part of the spinal column, and above the spine, if the lower limbs are used as a fulcrum.

Q. According to the action of the multifidis spinæ and rotatores spinæ muscles, if those on one side only act, the vertebræ would be rotated, the spinous process toward the side on which muscle is contracted and the transverse process backward and downward or forward and downward?

Answer.—The action of the muscles in question can best be ascertained by causing the patient to assume the ventral position and bend the body to either side. In pathological conditions such as scoliosis with rotation, and rotation is usually present, contracture of the muscles on one side draw that part of the column to the same side, i. e., contracture of the muscles on the right side, produces a swerve to the right with rotation in the opposite direction. The transverse processes on the right side are thus brought into prominence as a result of the rotation.

Q. Where vertebræ are approximated or separated are not the ligaments involved rather than the muscles?

Answer.—In nearly all, if not all, such lesions, the ligaments are affected before the muscles. I am of the opinion that a great many lesions of the spinal column consist of a sprain of the ligaments with thickening.

Q. Case-Woman, multipara (8 children). Age fifty-one. Three years

ago menses ceased. Had one reappearance some few months after cessation. Now has commenced to flow again and has been flowing for five weeks, two or three napkins a day. Has some stomach and sympathetic heart trouble. If there be a tumor there it is small and soft. Lesions found were 5th lumbar, anterior, 3rd and 4th lumbar, posterior; some crowding together of lower ribs and enteroptosis. Is there any danger of cancer soon?

Answer.—It is not likely that the patient has a fibroid tumor for it is decidedly the exception for one to develop at a period so late. It is not uncommon for a patient to be quite irregular as to the menstruction at this time on account of the nervous and vascular changes that the organism undergoes at the change of life. I would be on the lookout for cancer if the cervix is not in a healthy condition. Examine the cervix with a speculum and note color, etc. It will take sometime for it to develop even if it be a cancer. I am of the opinion that the case is one of congestion of the uterus, judging from your description and that it will yield to treatments directed to the relief of the pelvic congestion.

Q. Woman, thirty-five. Condition, formation of "lumps" in the breast. Began five years ago at birth of child, when left breast was lanced. The first "lump" appeared at the point lanced and has never wholly disappeared. Others have formed accompanied by swelling of entire breast and enlargement of glands in axilla, all of which processes are very painful. Nearly all of the lumps (which are perhaps 11/4 to 2 inches long and 1 inch wide) disappeared; swelling decreases, axillary glands return to normal size and pain almost entirely relieved during and just following the menstrual flow. The condition had been wholly confined to the left breast until February last, when patient had the grip. Following this alump appeared in the right breast, nearer to the circumference than in the left. This lump did not disappear during next menstrual period, nor has it yet. Since February the left nipple discharges at intervals a drop of liquid which looks like dark thin blood and when dried leaves a brownish stain, but has no odor. The amount is perhaps from three to five drops in twenty-four hours, and is less if patient does not exert herself. The breasts have been much more painful and swollen since February. She has been in the habit of steaming the breasts and massaging with olive oil to relieve the pain, when very severe. The skin around the nipples, seems equally loose on the left and right sides. Neither nipple is very prominent nor is there retraction. If the breast be allowed to drop toward the axilla, at one side outside the area of pigmentation, a dimple forms as if the skin were adherent to deeper tissues.

The patient is very flat chested with clavicles drawn back rather closely. The third rib is very prominent in front, the second, third and fourth thoracic are anterior, but the vertebral ends of upper ribs show no abnormality nor tenderness. The muscles of the neck were considerably contracted but apparently no special neck lesion. Since there is so close a relation between the menstrual flow and this difficulty of the breast, a vaginal examination was made but parts were normal except that the mobility of uterus was lessened. She has

no pelvic pains at any time but describes a feeling of "weakness" through the pelvis after any prolonged physical effort.

Answer.—The case has all the appearance of cancer, yet, having seen similar cases in which cancer did not develop considerable encouragement can be offered. The injury was the beginning of the trouble and since the circulation through the breast is in someway affected by menstruation, the symptoms of course would be more marked at that time. The enlargement must be in one of the milk glands. Another feature of it that might be encouraging is the fact. that it fluctuates as to size. An operation would not do much good even if it were a cancer since it would not cure, if the cancer had developed, and, if it were not now developed, the operation would make it grow the more rapidly. I believe by careful treatment applied to the ribs in relation and the vertebræ and by gentle manipulation of the breast itself, lifting it, and by stretching the tissue which seems to be contractured, you can do a great deal with the case, The precaution I would mention is, do not manipulate too hard directly over the affected area. My advice would be to continue treatment for a few weeks, and, if the condition does not grow worse, it would be encouraging, but if the condition grows worse, perhaps it would be more satisfactory to the patient to undergo an operation, although it may not help. If the patient improves at all in a month or six weeks it should be encouragement enough to you and to the patient to continue the treatment. The shrinking of the tissues around the nipple, which causes retraction and the hardening of the tissues are important indications of the cirrhosis form of cancer, they seeming to be absent in this case.

Q. Case—Lady. Married. Age twenty-three. Last menstruated about the middle of July, 1904. Thought she was pregnant until last December, at which time there should have been quickening and increased size of abdomen. Consulted two M. D's. who treated her for suppressed menses but did not help the case. Examination revealed left innominate rotated backward and much tenderness at the tenth dorsal. Applied strong treatment to correct these lesions, also strong breaking up treatment to lumbar region. Patient became quite nauscated before leaving office. One hour later I was called to her home. She was having quite severe pains. In about an hour a clot was expelled; same was organized and about the size of one's fist, pear-shaped and enveloped in a membrane that came away with the clot. It consisted of fibrous stroma with interstices filled with black blood clots but I could find no traces of any products of conception. Can get no history of abortion. What do you think this is and the cause of the condition?

Answer.—From description, this case appears to be one of missed abortion. In the average abortion the products of conception are expelled within a short time after fetal death but in exceptional cases they are retained for sometime, seldom so long as in the case described. Disintegration and softening result so that it is impossible to be able to outline the placenta, chorion or embryo. A uterine mole frequently develops and it appears as a mass of tissues without form. So in the case described there are indications of missed abortion with formation of uterine mole for the following reasons: (1) history of case; (2) character of mass expelled; (3) time of expulsion, it being about the ninth month.

Atlas Notes.

Dr. C. O. Cline spent several days at Monticello, Ill., last week. He reports Dr. Homer Stewart, who has charge of his practice, as doing nicely.

Messrs. John F. Bone and C. O. Cline of the Senior class and Chas. S. Fisher of the Juniors are among those who are taking the Illinois State Examination at East St. Louis this week.

The Club has recently purchased the following articles: Webster's Unabridged Dictionary, vaginal speculum, Smith and Morelock's Swing, stethoscope, Edgar's Obstetric, twenty-five chairs and a double dictionary stand.

Landlord Dockery is giving the Club quarters a thorough overhauling. The wood work is being revarnished, the floor in the North room repainted and the walls and ceiling are being greatly improved by papering and plastering.

The following names are published in accordance with amendment as published in November Bulletin: G. R. Boyer, B. D. Coon, F. F. Coon, J. M. Coffman, J. W. Henderson, C. L. Kirkham, Clark Morris, L. O. Morris, D. H. Reese, C. L. Riehardson, J. B. Schrock, H. B. Sullivan.

Dr. L. N. Pennock of the February class, 1904, spent a week in Kirksville during the month of April visiting his wife and infant daughter—Osteopia,
his Alma Mater and the Club. By invitation the Doctor gave an interesting
and instructive talk to the Club on the evening of the 15th, in which he indicated some of the obstacles most likely to confront the novitiate practitioner of Osteopathy, which he must learn either to evade or vanquish. These
thoughts were very aptly reinforced by the relation of personal experiences.
Dr. Pennock was numbered among the best of his class and has given proof
of his merit by his success in the field. He is a modest gentleman, bearing evidence of refinement and culture. Come again Doctor.—J. S. A.

Members initiated since our last issue: Charles A. Wilske of Schenectady, N. Y. Mr. Wilske came to the A. S. O. from Chicago where he was engaged as architect for a grain elevator company. He is very adept in the art of draughting, many of his drawings of the nervous system and of various organs of the body are used by members of the faculty to make demonstrations to the classes. He became interested in Osteopathy through his acquaintance with Dr. Klumph whom he met at the South Haven summer resort.

Mr. John Rieger of the Senior class: Mr. Rieger is one of the staunchest men that ever rode the Atlas goat. It is with genuine pleasure that we present him to our members in the field. He is a brother of Attorneys Rieger & Rieger of this city. His wife has been practicing in Red Lodge, Montana for the past four years. It is perhaps needless to say that her success prompted him to take up the study. An invitation was extended Mr. Rieger early in his Sophomore term but at that time he did not realize the practical value of our organization. It is safe to say that no more thorough or conscientious student has attended the A. S. O. in many a day. Like Mr. Wilske, he is expert at drawing. The cut of the sympathetic system which appears in Antes and Kent's, Physiology Quiz is the result of Mr. Rieger's handiwork. This is by far the best cut of the kind it has ever been our pleasure to see.

THE BULLETIN.

#### Axis Notes.

Mrs. Miller has been to Chicago and returned since our last issue.

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Mesdames Brownlee, Mantle, Misses Hartwig, Newman, Prindle, Mantle and McLeod made a trip to St. Louis the week of May 10th.

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We have received since last issue, Mrs. Lillie Collier of Edinburgh, Illinois, formerly a teacher of several years experience and now studying osteopathy with her husband. Mrs. Collier is a member of the Sophomore class.

A very interesting letter from sister L. A. Nevius was read before the Club recently. It pertained chiefly to the active members therefore no excerpts are made for publication but we wish Dr. Nevius to know that her words of kind advice and encouragement are much appreciated.

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Some Gems from Miss Catlow's Talk Before the Club, Wednesday, April 26, 1905.

First-Lifters and Leaners:-

"We should be truly grateful to lift or help lift a little burden."

"We see ourselves reflected in others."

"When invited to join the Axis club our first thought is, 'will it pay?' "

"We considered the recent trials of the Club and the stability it manifested throughout the same and decided to accept."

"As club members, we must cease to consider self alone."

"What right have I to expect the members of the Club to give me the benefits of their organization and I not lift my hand to the burden."

"If it takes machinery to run a club—and it does; if it takes money to run a club—and it does,—what right have I to throw the burden back on others and not help lift it."

"We ought to think whether we're lifters or whether we're leaners."

"Whatever, as an Axis Club, we do, we are helped or hurt individually—we must work for the Club."

Second-Accepting the Verdiet:-

"If you don't play my way I won't play at all is children's fashion—we have passed the childish stage."

"I hold my right not to violate conscience."

"The thing our Club stands for is that we be more womanly women."

"There is a good principle behind the law of letting the majority rule."

" 'No man liveth unto himself and no man dieth unto himself' "

"Live among people for the purpose of making them better."

"We are more prosperous on every line than before the trouble."

"You people lived straight up at that time and brought us where we are."

We are glad to observe the spirit of harmony and good feeling that prevails among the Club members, also the deep interest taken in all the work. No one ever says, "please excuse me" when appointed to a hard duty, while some of the officers and members of committees work like Trojans and sometimes look ready to drop but never a murmur is heard. This is but the living expression of the spirit that was evoked last autumn during our period of stress and storm-the active earnest spirit of loyalty to truth and courage of conviction that brought the Club safely through that hard trial and which continuing has secured to it a degree of prosperity heretofore unexcelled and perhaps unequalled. Our treasurer informs us that our coffers are fuller than ever before in the history of the Club during this part of a term. Our practical work is under full headway and every active member provided for and we now number about sixty. The thunder clap last term-thirteen resignations at once and scenes following-had the effect of electrical storms generally in purifying and cleansing our atmosphere. It revealed to us our own power and taught us more wisdom and carefulness in the selection of new members. The twelve faithful ones who left us in January to become graduate members in the field, the present Senior members and those of the Juniors who were at that time within our fold, each contributed to the successful issue and each remains a pillar of strength in her place; but so much other splendid material has been added in our new members admitted since then that the Seniors who will soon depart have no fear of retrogression for our beloved Club. We are more than ever happy and proud to be Axis members.

To our sisters in the field, we wish to express appreciation of all the kind words and wishes you have sent us, also thanks for prompt payment of dues on the part of so many. We are glad you think the Bulletin improved. We think so too and we call your attention to the fact that its editor, Mr. Vanderburgh, is deserving of all our bouquets; let us give them to him now during his life in office and not wait to strew our flowers of appreciation over the cold bier of his resignation, for he is a Senior and must leave us in June. He has proven himself possessed of unusual ability as editor and has exercised conscientious and untiring effort in the management of the business departments connected with the publication. He has even spent much valuable time in striving to correct that very incorrect list of addresses of graduable time in striving to correct that very incorrect list of addresses of gradu-

ate members. If some still fail to get their Bulletin it is certainly not Mr. Vanderburgh's fault but must be laid to the blame of his predecessors in office or perhaps, in many cases, to the members themselves who fail to give proper notice or to furnish necessary postage to have it forwarded. We think he has that crooked list about straight now but if any of you know of a lesion anywhere do please send your correct address now and get it properly inserted in order that the body of our Club may be a harmony throughout.

Now what do you think of that? If the Bulletin has improved it is due to the excellent articles which have of late been contributed to it. We thank Mrs. Brownlee for her compliment but desire to assure our readers that if they wish to have a readable and interesting journal, it will be necessary for them to lend a helping hand.—Ed.

#### From the Field.

#### AXIS FIELD NOTES.

"Wishing the Axis Club much prosperity."—Dr. Loretta L. Lewis, Paris,III.

"With best wishes for the Club, fraternally."—Dr. Margaret I. Sheridan, Cleveland, Ohio.

"With best wishes for the prosperity of the Club."—Dr. Eliza Edwards, Cincinnati, Ohio.

"With kindly greetings to you and all the sisters."—Dr. Chloe C. Riley, New York City, N. Y.

"I trust the Club is in a flourishing condition."—Dr. Ethel Louise Burner, Bloomington, Ill.

"I wish the Club and all members the best success."—Dr. Lina J. Wrigley, Scandia, Kansas.

"With best wishes for a very successful year for the Club."—Dr. S. Virginia Crawford, Renovo, Pa.

"The Bulletin is improving. Keep on with the good work. Success to it and the Axis Club."—Dr. Mary B. Sherburne, Rutland, Vt.

"I am always anxious to get the Bulletin as it keeps us in touch with the Axis Club work, both in school and field. I send kindest greetings and good wishes for the success of the Club."—Dr. Orie Coppernoll, Wilber, Nebrasks

"Hope the Club is in a prosperous and happy condition. Please extendabest wishes to the members and tell them I have never seen a live goat since that did not remind me of the one I once rode in Kirksville."—Dr. Nellie M. Fisher, Youngstown, Ohio.

"My heartiest wishes for your continued success" -- Dr. Isabelle Moretock, Lincoln, Nebr.

"The Bulletin looks quite fine in its new cover. Congratulations."—Dr. Aughey V. Spates, Sherman, Texas.

"The Bulletin is always read with pleasure and I hope always to be an Axis member."—Dr. Nellie Mossman, Chadron, Neb.

"The Bulletin of late has been a valuable publication. One could scarcely realize that such a decided change could be brought about."—Dr. Sara Mae Van Doren, Allegheny, Pa.

"My very best wishes for the success of the Club and the hope that in the future I may be of more account to it than I have been before."—Dr. Florence Brown Stafford, Pittsburgh, Pa.

"In Mrs. Overton's absence I will play private secretary. I wish to assure you of her continued interest in the Club whose high standards she labored so faithfully to maintain during her presidency."—Dr. J. A. Overton, Tuscola, Ill.

"The Bulletin is always a welcome visitor, bringing with it, pleasant associations of bygone days. With kindest greetings and best wishes for the cotinued success of the AxisClub."—Dr. Maud G. Russell, Commerce, Texas.

"I was much pleased to note the enlargement and improvement in the recent issues of the Bulletin and am glad our club is so prosperous this year. That it may continue to prosper through the coming years is my earnest wish." —Dr. Agnes Dandy, Princeton, Mo.

"I consider the Club fortunate in having Miss Prater for its president. You will be gladder and gladder every day that you are an Osteopath when you get to work. I find ladies do prefer to be treated by women, although, well, many men do too—wishing success to the Club."—Dr. Carrie A. Bennett, Joliet, Illinois.

"I notice some object to payment of dues, thinking they may be helping pay for receptions which are given. To my mind, they are important not only in acquainting the members with the Freshmen, but the part of receiving and entertaining is a good training for many Club members. With very best wishes."—Dr. Arbie Jane Pennock, Philadelphia, Pa.

"It is needless to say how I miss going to the Club. I think of you all every Wednesday afternoon and wish I could step in and join in the meeting. Glad to know you are getting so many nice good members. The Club could not help but flourish with such competent ones to run it. Kindest regards to all the Club members along with my very best wishes for the Club."—Dr. Julia May Sarratt, Waco, Texas.

"Please put me down as one who will be very glad to send \$10 to be used in building a home for the Axis and Atlas Clubs. I think Dr. Fiske's idea a good one. I received more support last year from members of the Clubs than would pay dues, etc., for twenty years. I think we all appreciate the benefits of the Clubs but are busy and often forget to say so. Wishing you all the best success."—Dr. Josephine DeFrance, St. Louis, Mo.

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"I gladly enclose check for my Club dues. The pleasant association of the Club and the splendid work gotten in it are especially appreciated in the field. I want to congratulate the Club upon the able management of the unhappy affair last term when certain members withdrew. I trust there is a unity of spirit existing now and that you are in a most prosperous condition. The field work is gratifying and delightful, if at times hard and perplexing. I am glad every day I am an Osteopath. With very best wishes to the Club, I am, sincerely yours."—Dr. Ella F. Bissell, Madison, Wis.

List of Axis members in the field who have paid dues since last issue: Drs. Maude Waterman DeTienne, Mary B. Sherburne, Orie Coppernoll, Abbie Jane Pennock, Loretta L. Lewis, Ella F. Bissell, Eliza Edwards, H. K. Pigott, Margaret I. Sheridan, Sylvia R. Overton, Lina J. Wrigley, Florence Brown Stafford, Nellie M. Fisher, Ethel Louise Burner, Alice I. Beebe. Agnes Dandy, Nanny R. Ball-Baughman, Ollie A. Lynn, Emma B. Nugent, Bertha A. Buddecke, Maud G. Russell, Chloe C. Riley, Aughey V. Spates, Sara Mac Van Doren, Elizabeth M. Crow, Zewla A. Nevius, Bessie M. Spencer, Nellie Mossman, Carrie A. Gilman, Grace H. Teall, Marthine M. Bandel.

#### ATLAS FIELD NOTES.

Dr. J. L. Near is practicing in Tulare, Calif.

Dr. W. C. Montague has moved from Eureka, Calif., to Cleveland, Tenn.

Dr. J. K. Dozier: "It is very gratifying to note how the Club is advancing."

Dr. Joseph M. Smith has moved from Sutton, Nebr., to Burr Block, Lincoln, Nebr.

We regret very much to learn of the death of Dr. George H. Cromie's father, which occurred in Philadelphia, Pa., on Saturday, April 15th. Brother Cromie has the sympathy of the entire Club.

To accommodate his growing practice, Dr. Franklin Fiske has doubled the size of his office suite in the Corning block, taking a long time lease of adjoining rooms. He is also making improvements in the office equipment.— Portage Wisconsin Democrat.

Drs. J. A. and M. W. DeTienne have given up their practice in Colorado Springs, Colo., to take charge of Dr. Teall's practice at Brooklyn, N. Y. Brother DeTienne writes: "Let the club maintain its high standard in membership and Bulletin and we will all be proud of our emblem."

Dr. R. L. West complains that he has received the Bulletin very irregularly since he went out. We have sent his copy to 34 Grand St., White Plains, N. Y., which address is on his letter head and if Dr. West has failed to receive his Bulletin since January, the fault must be with the post office department.

We check our list over twice each month so are positive the Bulletin goes to the address we have.

THE BULLETIN.

Dr. K. T. Vyverberg has moved his office from 9 Milford Block, to Room 1, Taylor Bldg., Lafayette, Indiana.

H. D. Norris: "I would not think of severing my relations with the Club for I expect to return for further study and would not feel entirely at home if I could not attend the practical and social events."

Dr. George W. Perrin has changed his address from 1625 East 13th St., to 1635 East 13th Avenue, Denver, Colorado. He writes, "The proposition offered by Dr. Franklin Fiske is a good one and I favor it."

Dr. E. E. Harden has moved from Columbia City, Ind. to 313 S. Main St., Butler, Pa. Dr. Harden was doing well in Columbia City considering the size of the town but did not feel justified in remaining there as Butler appeared to be a more desirable place for a home as well as for the practice of his profession.

Chas. C. Teall, Brooklyn, N. Y.: "I am sailing for Italy tomorrow and must be square with Club before leaving. Osteopathy is fine for the patient, but mighty tough on the Osteopath and I go for needed rest. Dr. John A. DeTienne, a valliant Atlasite, is now located with me.

Dr. J. H. Stephens is doing well in White Sulphur Springs, Mont. He writes: "Tell the graduating class that Montana is a good state to locate in. While there are not many cities in the state and consequently could not accommodate many more osteopaths, still there are some good openings and the practice is well advertised as we have had a good law here for some years. Best wishes to the Club."

Dr. J. L. Holloway of Dallas, Texas, writes: "Any evidence of enterprise manifested by the Club is always a pleasure to the field members who look back upon their associations there with genuine delight. Convey to all my best wishes and kindest regards. I hope to contribute a short article as per your request of last month. Am fairly busy with bright prospects."

We await with interest Dr. Holloway's article which will appear in the June issue.

Dr. George W. Reid of Worcester, Mass., whom we reported as being in Kirksville when our last issue came out, has just completed a course at the Denver Homeopathic College of Medicine. Dr. Reid says that a knowledge of medicine only strengthens him in osteopathy, the homeopath treating the symptom without regard to the cause. Dr. Reid will continue to practice "Genuine osteopathy."

"I know myself how hard it is to get and keep a list of out going—undecided—where—to—locate members for, as I said, I have had some experience right there myself and I hope you will keep this in mind when you yourselves graduate—so with the best of wishes for the Club and as much and more success to the out going members as I have met with myself I'll say goodbye."

—Dr. H. K. Pigott, Toronto, Canada.

Dr. Francis J. Beall: "From the kicks I see of some of the field members as to paying dues, I think it would be a good idea to have it so a member in the field could buy a life membership and then he would not be approved

with paying a small amount each year."

We cannot agree with Dr. Beall as to the advisability of establishing a life membership. It seems to us that it should not be an annovance to send one's dues once a year. The Pylorus' books show that it is more of an annovance to send in a large check than a small one, at least the greater portion of the members owing only one dollar have responded to the statement sent them, while only a few of those who owe for several years have remitted.

Henry Stanhope Bunting: "It is a distinct pleasure to send you my check for dues to the Club. It would have been sent earlier but I have expected to visit Kirksville and the Club for some weeks. Indeed I think now I will come down within a fortnight but it would better go in advance of me in case I again

Express my great satisfaction to the membership over the continued growth and vitality of the club and its sister organization at the present movement

to get all field members in good standing.

I hope to be able to attend a meeting on my expected visit to the old stamping ground and if I do I will tell the fellows some happy and funny things in reminiscent view about the nights when we started the "Atlas Club" and got things moving.

Dr. L. C. Drost, North Platte, Nebr.: "Enclosed please find dues for 1905. It has been mere negligence that I have not remitted and not through any dissatisfaction with the club or its management. If I understand correctly, the original ideas of the promoters of the Club were for the purpose of propagation and bettering conditions of Osteopathy as a science and not for the furthering of interests of its individual members. The howl that so many field members are making about paying dues, claiming they are deriving no special benefit, appears to me to be a very selfish way to look at it. Where would the science be today if all of its followers in the past had insisted upon immediate returns for all efforts put forth? I am glad to be identified with the Atlas Club for I believe that within our ranks we can boast of the power that gives momentum to the workings of our science.

We are having quite an extensive and varied practice. Have some very

interesting cases that I will try to report on in the near future.

With best wishes to all who wear the emblem of such a grand and noble causè."

"Through the influence of Dr. J. W. Holland, dean of the Jefferson Medical College, a bill has been introduced into the Legislature to permit students who have completed their sophomore year to take the State board examination in anatomy, chemistry and physiology.

Although these are minor branches, these are the ones in which candidates for the degree of doctor of medicine commonly fail, because the subjects are taught during the first two years, and are forgotten before the student has fin-

ished his course."

I'm enclosing a little clipping to give you an idea as to how the Pennsylvania legislators are alarmed lest their supply of "M. D's." are exhausted.

Please note that anatomy, physiology and chemistry are "minor" branches! I should like to see the expression on the countenance of one of these "Medical Pets," if he should ever be wise enough to enter the old A. S. O., when he first discovered how "insignificant" those branches are in that institution.

If these are "minor" branches I should like to know what their "major ones are. Perhaps text books on "How to keep the laity in ignorance," "Treatise on dosing" or "How to throttle Osteopathy," etc.

One might conclude that their bitter opposition to osteopathic legislation in this state, was due to their fear of osteopaths passing examinations in those "minor branches." Fraternally.

L. GUY BAUGHER.

Paul M. Peck: "Permit me to suggest to you the desirability of the Atlas Club purchasing a large scrap book to be kept in the Club rooms for the preservation of matter which at times is very desirable for the members to have for reference, and which in the absence of any one responsible for the collection of same, would be lost and not serve its full usefulness. I realized the lack of something along that line when I was Noble Skull, but failed to inaugurate the idea into working order. I believe a censor should be appointed who should clip articles valuable for future reference as pertaining to the profession, and the members should contribute to this volume, also. Every Ostcopath should begin keeping his scrap book when he enters school. When he gets out in the field, he will find the need for reference to some article which would be of much service to him at the moment, if he could recall it accurately. One never knows what time he may be called upon to compile an article to answer some false charge of an opponent to our system, and at such time, the scrap book will prove "a very present help in time of trouble." So many articles are written in various magazines now, which are worth preserving in ones collection of literature, but without the scrap book habit, these will get away, and much of their good is lost.

If you think this idea worth enlarging upon, I offer it to you as a suggestion which if adopted, will prove a good thing for the Club. Maybe it is being carried out now, but if not, use it if you think worth the while.

Shall try to get your article for the June issue as requested."

H. L. Chiles: "I want to suggest that the members of the Atlas and Axis Clubs hold a reunion dinner in connection with the Denver meeting of the A. O.A. These gatherings should be instituted there and hereafter be a permanent feature of the annual meetings. The convention program will easily admit of this, as it is proposed to hold just one forenoon session each day-and the affair as suggested above could be held as an evening dinner or noon lunch and form a most pleasant and profitable function. I would urge that the local chapters of the two Clubs take this up and appoint committees of graduate and undergraduate members who will be in Denver to arrange the details of the affair. Do not have it elaborate or expensive. I should make a dollar or dollar fifty the limit per plate. The Brown-Palace Hotel which is to be the headquarters will perhaps not serve us for these prices but other hotels of the city will. If a simple dinner or lunch can be arranged with speeches and felicitations if desired, it will at once become a real part of the A. O. A. annual meetings and form a closer means of acquaintance and union among the field members.

I trust the Alumni Association of the A. S. O. and the other schools will arrange for similar functions.

In future the A. O. A. programs will admit of them as they will not be so strenuous, and these meetings will help much in bringing the members out

and prevent the "segregation habit," fatal in our profession as in others.

These suggestions come to me as a sleepless sleeper, but I am sure they

will strike many a responsive heart.

I am in Chicago for a day arranging rates and specials for the Denver meeting and am pleased to announce through the Bulletin that we shall have low rates from any point. As examples—St, Louis, \$21, Chicago, \$2.16, Buffalo, \$34.25 round trip. Let us have hundreds of Atlas and Axis men and women present."

A. D. Glascock: Enclosed find one dollar, my dues to Club for 1905. I received a statement some time ago, but laid it aside and forgot that I had ever received it till I noticed in the last Bulletin that some of the members had been "called, on account of delinquent dues. I cannot believe that any of the boys have intentionally failed to pay their dues, but have thoughtlessly neglected it, just as I have, many of them are no doubt so perplexed with the care and rush of business that they are oblivious to minor affairs unless reminded of them, and then, perhaps busy at the moment forget them, the time to attend to small matters is when they present themselves. And I find if I do not attend to them at these particular times that they often go undone. Procrastination is a dangerous habit and always puts one to the bad. I judge from the Bulletin that the Club is in a very progressive state and that faithful fido is well kept and always equal to the occasion.

I would like very much to be with you from time to time and enjoy once again the good old times gone by. I am proud to know that our old wheel horse, Dr. Clark, is standing by the Club like a good fellow He is a man that

you will always find doing the right thing by you.

My class liked him so well that it was hard for the Doctor to keep us from "working over time." This is a little joke. I often wonder if the classes following that of June, 1903, had so many noted characters, such as specialists, scholars, confidence men, preachers, movement manufacturers, billard punchers, athletes, expert diagnosticans, (couldn't tell impaction from pregnancy,) artists, knockers, Moore and Solem advocates, cap and gown kickers chronic black-ballers, etc. But I presume there is no discount on any of the classes, judging from all reports. Osteopaths are naturally a progressive class. I wish the Club unbounded success in their work. Tell the boys to load up with all the Osteopathy they can, put their side boards on, as well as their side burns. They will need it all when they get in the field. Its easy to be an Osteopath in Kirksville, but the man who has the moral courage to stand up to his convictions and endure the slams and slurs of prejudice and ignorance deserves much credit.

You cannot cure every case but you can cure a greater per cent than any other physician living, in spite of the face, that you are looked upon as fakes by fifty per cent of the people but not the fifty per cent who are progressive and intelligently observe, read and think. While there are many disadvantages and unpleasant things to meet. I wouldn't be any thing but an Osteopath.

Its the noblest profession on earth, providing a doctor has a genuine charac-

ter backing him or her in it.

And some simple, little cure will oftentimes win you a loyal friend and make the heart of your patient palpitate in the joy of renewed health to the extent of offsetting all the unpleasant things you have ever heard about your-self, and you will barely escape contracting magnum caput. Only last week I had the pleasure of reducing a fever to 99½, that seven hours before registered by the pig tail 104. Patient was deathly sick and said he was going to

bamboose for the better land. I took Pap's advice and manipulated the splanchnic hose, "threw water on the fire" after being with him three hours. he was easy, and if you could have seen the sweat coming out of him, you would have said, Amen, for the father of Osteopathy. It will do the work and don't you ever doubt it.

Vyverburg-Hubbard.

A beautiful home wedding, though characterized by simplicity, was that of Miss Nelle Mae Hubbard and Dr. Kyrn T. Vyverburg, which was solemnized last April 12th at 8:30 o'clock, at the residence of the bride's mother, Mrs. Sarah M. Hubbard, No. 204 south Ninth street. The spacious rooms of the residence were attractively decorated and lighted by numerous candles and a number of guests, consisting of the relatives and most intimate friends were assembled to witness the pretty nuptials. Rev. Walter D. Cole, pastor of Trinity M. E. church, was the officiating minister and the ring service was used. A short recita was given by Mrs. William Kirkpatrick, of Catoosa, I. T., sister of the bride, and Prof. Frederick Dapprick, at the conclusion of which the bridal couple, with the little flower girl, Miss Louise Kirkpatrick, niece of the bride, leading the way, entered to the strains of the Lohengrin wedding march. In front of the large fire place in the back parlor were masses of palms and clusters of crimson ramblers and here the bridal party met the minister, who pronounced the ceremony. During the impressive service Bartell's "Dream Song" was softly played.

The bride was a picture of girlish beauty in a gown of white organdic elaborately trimmed with cream lace and ribbon. She carried a large bouquet of lilies of the valley and in her hair she wore the same flowers. Little Miss Kirkpatrick was daintly attired in a gown of white, with pink ribbons and carried a basket of daisies. Following the congratulations refreshments were served in the dining room, a number of the bride's young lady friends assisting. The centerpiece for the table was a large basket of Liberty roses, surrounded by ferns. Both the front and back parlors were attractive with baskets of crimson ramblers artistically arranged, and in a side room the collection of elegant

gifts was displayed.

The bride is a young lady of winsome personality, being possessed with a sunny, amiable disposition. She is popular with all who know her. She is a graduate of the Lafayette high school and also attended Purdue. She has considerable literary ability and has occupied the position of society editor both on the Courier and The Sunday Times, more recently being with the Courier. The groom is a rising young osteopathic physician and during his residence here has gained many freinds. He is a young man of high principles, great ability and strength of intellect and is worthy of the charming bride he has won. Dr. and Mrs. Vyverberg left on the early morning train for a brief trip south.

The bride's going-away gown was a black and white suit with hat to match. The groom's gift to his bride was a gold bracelet with pearl and diamond set-

tings and the flower bearer was remembered with a gold ring.

Among the guests from afar were: Mr and Mrs. Moriand Binford, of Crawfordsville; Herbert Vyverberg, of Dubuque, Ia.; Miss Bertha Roach, of Delphi; Mrs. N. A. Adams, of Champaign, Ill.; Mrs. J. J. Johnson, of Stanberry, Mo.; Mrs. Arthur Taylor and Miss Carrie Johnson of Indianapolis; Miss Mabel Bridge and Miss Victoria Rice, of Attica.

Dr. and Mrs. Vyverberg will be at home after May 1 at 207 south Ninth

street.—Sunday Times, Lafavette, Ind.

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