The Journal of Osteopathy

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*THE PRINCIPLES OF OSTEOPATHY.

(From the Independent, November 9, 1905.)

(Nine months ago we called attention to the fact that no American has yet received one of the five prizes of $40,000 each, which are annually awarded by the Nobel Foundation of Sweden to the men who have made the most important discoveries in chemistry, physics, physiology and medicine; have produced the most distinguished work in idealistic literature, and have done most to promote peace. This naturally raised the interesting question whether we have in this country men sufficiently great to rank with the twenty-four Europeans who have received these awards, and we asked our readers to nominate those among our American scientists, authors and peace-makers whom they considered most worthy of this honor, his invitation was most enthusiastically responded to by the osteopaths, who circulated petitions and postal ballots with such zeal in behalf of the claims of Dr. A. T. Still, as the American citizen most deserving of the Nobel Prize for discoveries in physiology and medicine, that all other candidates were soon “snowed under.” In consequence of the great interest in Osteopathy, as indicated by this, we have asked its founder, Dr. A. T. Still, to contribute an article to The Independent on his discoveries. In the following issue, November 16th, we will print a reply by a “regular” physician, and on November 23d we will report the result of the voting for candidates for the Nobel Prizes. Dr. Still was aided in the preparation of this article by his nephew, Dr. G. A. Still, one of the instructors of the American School of Osteopathy.—Editor Independent.)

Whichever side of the case, “Religion vs. Charles Darwin et al.,” one wishes to take; whether one believes that man was made from dust, in a finitely short time, by an infinite being, or whether he was made from protoplasm, in an infinitely long time, by the action of finite forces, one must admit that the result has been a practically perfect creation. The wonderful mechanical arrangement of the human system was a marvel to me from the time I studied the meager course in anatomy as prescribed by the medical schools of my day; and yet as I continued to study and took a “special” course in dissection on the “borrowed” bodies of Indians, on the plains of Kansas, I was also struck with the wonderful simplicity of the system. No matter how complex a structure or function was, it was explainable, when thoroughly understood, by the simple principles of mechanics.

*The above article was written by Dr. Geo. A. Still after numerous interviews with the Old Doctor” and the editor of the Independent made an error in quoting the fact.
In this little description of my science I intend to give the reader, in a small way, the facts on which and the reasoning by which, thru many years of adjustment, I finally evolved Osteopathy. I believe that if the reader will follow me he will find I am stating nothing as a fact that science will deny, and I also believe that the thoughtful reader will admit that with these facts my conclusions are inevitable. As for the practical side of the question, the thousands of "incureables" that I have treated and cured speak for themselves.

My examination and study of the human mechanism showed me that it differed from the jelly-fish and such animals in but one respect—it had a bony skeleton. The jelly-fish had a brain and nervous system, muscles, organs, blood-vessels, etc. The difference here was only one of degree. The jelly-fish had no bones, and I found that for any high development in the animal world bones were essential. They constitute the stability of the system, and just as the "osteons" or bones differentiate man from the jelly-fish, so is Osteopathy differentiated from the jelly-fish systems of therapeutics which, like the boneless ink-fishes, hide their weakness and stupidity in a cloud of long, meaningless words and outlandish symbols taken from the Greeks, Romans and Egyptians. I found these bones to consist of a fibrous tissue, compactly infiltrated with the phosphates and carbonates of lime, with traces of other salts. Two hundred and six of them adjusted together went to make up the so-called skeleton. They were arranged according to the very best mechanical principles: the long bones, whose function was to act as pillars or supports, were hollow, the lines of cleavage were arranged to give the least possible chance of fracture and they were slightly curved when needed to lessen the jar of locomotion or other physical contact. When needed, I found that motion was arranged for by perfectly acting, self-lubricating joints; such bones as the vertebrae, with the extra strain on them and the delicate organs to support, were supplied with elastic connective tissue pads, or bumpers, between them which entirely prevented any jar; the ribs, constantly moving in respiration, were made exceptionally light and elastic; the bones of the skull, with the brain to protect, were made with the correct curves, were composed of two plates, overlapping each other, and in every detail constructed to best withstand external injury and force. Thruout the entire normal body, in fact, I found the construction to be according to the highest laws of mechanics.

Attached to the bones, I found a set of contractile organs whose function was to move the body; to help it secure food and other needed substances; to protect it from its enemies, either by fight or flight, and to help it build dwellings for protection from the elements. They were, in other words, the muscles which, using the bones as levers, fulcrums and points of attachment, made complicated motion possible, and distinguished the animal from the vegetable.

The continued source of energy and, in fact, the nourishment of the entire system I found to be a dark red fluid called blood, which was laden with oxygen from the lungs, combustible food from the digestive system and various strange chemicals from the several internal organs—all necessary to the healthy functioning of the system. This blood was brought by a system of elastic tubes called arteries, and after exchanging the oxygen and food for carbon dioxide and waste material, was carried away to a central, four-valved force pump, passing through the lungs on the way for reoxidation and purification. I found that throughout life this pump sucked in its cavity full of blood from the veins of the lungs and forced it out again into the main artery at the rate of seventy times per minute. From the main artery this blood passed thru smaller ones until, by way of the tiny capillaries, it either directly or thru its serum bathed every tissue cell in the body. In its course I noticed that it gave an extra good supply to the various glands or internal organs situated thruout the body. These organs, it seemed, each had its own particular substance or list of substances to take from or give to the blood. Some, like the kidneys, with their thirteen miles of microscopic tubules, would select urea and other waste or poisonous products and discharge them from the system, while other organs, perfect chemical laboratories, furnished some essential substance for the system, which substance it made out of the ordinary foods which it selected from the general blood stream. Some of these chemicals helped regulate the general blood pressure, some helped in the intermittent production of normal sleep, some furnished special food for the muscles, some for the brain and nervous system, some for the sexual and reproductive organs, and one system of glands, called the lymphatics, connected by tubes almost as extensive as the blood system, furnished the blood stream itself and the other tissues with millions of tiny cells called phagocytes, constituting the organized scavengers and germ-killers of the entire system, and also the tissue serums filtering thru the glands were made aseptic and antitoxic.

In all, I found the human body to be a self-feeding, self-cleaning, self-oiling, self-governed mechanism, provided with organs for the selection and procuring of its food or fuel; an alimentary system which could extract from the crude foods all the needed elementary chemicals for the system, while the four groups of elementary chemicals—carbohydrates, fats, proteids and inorganic salts—could be transformed into every needed complex chemical by the various glands or synthetic chemical laboratories of this complex system. The haemolymph and lymph glands, the red marrow, the pituitary body, suprarenals, thyroid, spleen, liver and pancreas, each furnishing its quota of substances, some for reagents at other places, some for energy production and others for antitoxic and bacteriedial action, were all more or less interdependent on each other for various compounds, and the disease of any of them would affect, to an extent, all others, while the death of any essential gland would cause death of the entire organism. The interchange of all these thousands of compounds, and the chemical equilibrium of the system depended entirely on a stream of ever changing fresh blood, propelled thru all the organs and tissues by the life-long "lubdup" of the little engine in the thorax. The very structure and characteristies of the individual, I found, were dependent on one set of tissues getting essential elements from the most remote organs; for instance, the growth of the long
bones and the height of the individual depended on a secretion formed in a gland in the neck called the thyroid. The blood stream was the common carrier for the entire system, enabling the different specialized tissues to help each other in the formation of essential chemicals and carrying away from them all their waste products. Its cessation of movement for even an instant, I learned, meant death, and this applied not only to the individual when the entire blood stream was stopped, but if the supply to an organ or part were entirely occluded, the death of that part followed, and the line of demarcation between life and death was the exact place where the occlusion occurred.

Understand that I do not claim to have discovered the circulation of the blood and such other known facts that I have mentioned. Others did that before me and were punished for it. Dr. Harvey was turned out of the English medical societies and burned in effigy when he demonstrated the circulation of the blood, and if I, building on these facts, demonstrated others and was therefore unpopular, why should I complain? Knowing that the death of any structure depended on the cessation of its blood stream and that death could not occur without this, I reasoned that disease, which is really a fractional death, must be due to a partial cessation of the blood flow from some mechanical obstruction to the artery or vein of the organ primarily affected. Studying hundreds of post-mortem specimens, I found this to be true in every case: that is, there was some derangement of the blood supply, either causing or accompanying all disease processes. From this fact came the first postulate of Osteopathy: “An unobstructed, healthy flow of arterial blood is life.” With this in mind I began to treat my patients by manipulations, to stir up the blood supply of those organs, such as the liver and bowels, which were easily reached. I got some results, but realized that I was only on the first round of the ladder. I had not yet found the real underlying cause of disease.

I knew that it was due to the comparative purity of the blood in three men who, when exposed to the same disease, one died, one recovered and the third did not even become ill; but what was back of this condition of the blood? In my day very little was known of vaso-motor nerves, sympathetic ganglia, brain and spinal centers for the different viscera and organs and special centers for special functions. Nerves were supposed to carry motor impulses to the muscles and to carry back sensations from the periphery, and beyond this little had been worked out.

To the men who have demonstrated in the laboratory by hard work the recently discovered cord tracts, brain centers and ganglionic functions, I and my followers give due credit, just as we expect credit from all true scientists for what we have demonstrated. From my dissections and studies, then, I learned that the spinal cord gave off thirty-one pairs of nerves which joined with the gangliated cord or sympathetic nervous system lying in front of the spinal column, and then penetrated every organ and tissue in the body, whether there was any apparent need for it or not. I found that in general the nerves accompany the blood-vessels, and then I learned that the size of the blood-vessel and the amount of blood it was to furnish to any part or organ depended on the vaso-motor nerves.

The nervous system controlled the rate of the heart and lungs; it controlled the selection and absorption of the food; it attended to the internal digestion and activities; it told each gland how much of its secretion to discharge and how much of another to take up. Every process in the entire organism was under the control of this all-penetrating telegraph system, with its great sub-batteries or sympathetic ganglia. If, then, there were any disease processes in the system they must be due to very strong mal-influences or the nervous system must be out of order—some mechanical derangement must exist. The system has but three enemies, namely, the unorganized poisons or chemicals, the organized poisons or bacteria, and traumatism. Its ability to cope with these depends at all times on the health of the nervous system, which, controlling the internal secretions and the blood stream, must furnish the elements to counteract the poisons, both organized and unorganized, and also to repair the injury done by trauma. Under ordinary conditions, then, there must be some mal-condition of the nerves to an organ or to the bactericidal organs before there could be local or general disease, and if there was such a condition disease would soon appear, because the body is always exposed to more or less disease producing elements.

Further study of the nervous system showed me that all the bodily functions were carried on by and had centers in the cord which gave off from these a pair of nerves between each pair of vertebrae to control the sympathetic system and the organs and viscera of that segment of the body. These nerves passed out through very small openings, called foramina, and thru these same openings between the vertebrae passed in the blood-vessels supplying the cord. Thru these tiny openings, then, went all the vital impulses between the cord and viscera, and also the gross nourishment of the cord. Thru them went life.

Here, as nowhere else, would an apparently minor condition cause widespread results, and here I found most of the mechanical derangements that I knew must precede disease. I say most, because other mechanical lesions, such as contracted muscles, tumors causing sciatica, constipated colon causing varicosities, etc., do occur, but at these foramina we find the seat of ninety-five per cent. or more of the lesions. The lesion consists of a slip or sub-luxation of a vertebra causing a change in the size of the foramen and consequent interference with the nerves and vessels. This theory has been proven a fact by examination, treatment and cure of thousands of cases. That it is possible, no one but a fool can deny; that it is a fact, no one who has thoroly investigated will deny.

The basis of Osteopathy seems simple, but to understand it, to prove it, to be able correctly to practice it, one must thoroly understand the entire system, one must study it like the best men of other systems of therapeutics study it, and so in our schools we teach all that they do, depending principally on normal and morbid anatomy and physiology, leaving out only materia medica. Our course is twenty-seven months—as long as the average medical school. We are
not masseurs and we don’t “rub” any more than the artist “dabs” the paint on the canvas for a Madonna, or the sculptor “chops” on a block of marble. We believe that man is mortal, and that if he drinks or absorbs enough prussic acid he will die; if he has his head cut off he will die; some time after senility begins he will die of old age in spite of any treatment, but we believe that the diseases of which most people die today before their time are due, not to a lack of some sort of a pill or tincture, but to the mal-working of some organ or set of organs, and that this, in turn, is due to mechanical interference with the nerve supply, and we have found most of these interferences at the vertebral foramina, and that we can remedy them is shown by the thousands of otherwise incurables that we have cured.

To end with, believing as we do, that the mechanical displacement of the bony vertebrae constitutes most of the lesions causing disease, and since the vertebrae are bones, and since osteon means bone, we do not think that “Osteopathy” is such a misnomer for our science as some critics would try to indicate by saying that we believe all diseases start in the bones and are cured by rubbing them.

Kirksville, Mo.

OSTEOPATHY AND PRACTICAL MEDICINE.
(From the Independent, November 14, 1905.)

By James J. Walsh, M. D., PH. D.

(Last week we published an article by Dr. Still, the founder of Osteopathy, on his discoveries. This week Dr. Walsh, a “regular” physician, replies. Next week we shall report the result of the voting for the candidates for the Nobel Prize, in which contest the Osteopaths entered with such zest. Dr. Walsh is Adjunct Professor of Medicine at the New York Polyclinic School for Graduates in Medicine, Professor of Nervous Diseases and of the History of Medicine at Fordham University Medical School, New York City, and of the Editorial Staff of the Medical News, New York, and of the International Clinics, Philadelphia. —Editor.)

Dr. Still’s article on Osteopathy is typical of that recent departure in medicine in many ways. Altogether there are probably about 2,000 words in his contribution, and considerably more than one-half of it is taken up with what every medical student knows at the end of his second year, while not more than 500 words are employed to state the supposed groundwork of Osteopathy, its methods of treatment, and its claims for recognition. Dr. Still tells the public so glibly that

“The nourishment of the body I found to be a dark red fluid called blood, which was laden with oxygen from the lungs, combustible food from the digestive system and various strange chemicals from the several internal organs—all necessary to the healthy functioning of the system. This blood was brought by a system of elastic tubes called arteries, and after exchanging oxygen and food for carbon dioxide and waste material, was carried away to a certain central four-valved pump, passing thru the lungs on the way for reoxidation and purification. I found that throughout life this pump sucked in its cavity full with blood from the veins of the lungs and forced it out again into the main artery at the rate of seventy times a minute. From the main artery this blood passed thru smaller ones until, by way of the tiny capillaries, it either directly or thru its serum bathed every tissue cell in the body.”

But this precious information has been with us for several centuries at least. It is nearly 300 years since Harvey discovered the circulation of the blood, tho he waited twenty years to publish his discovery; about 250 since Nicholas Stenson taught us that the heart was a muscle, and some 200 since Malpighi demonstrated the existence of the capillary connections between veins and arteries.

With regard to these older medical teachings Dr. Still is sufficiently correct. This is not quite so true, however, when there is question of some of the more recent advances in medicine. For instance, he suggests “that the growth of the long bones and the height of the individual depends on a secretion formed in a gland in the neck called the thyroid.” Now, there may be some truth in this, but it is not the whole truth. There is a small gland situated at the base of the brain and called the hypophysis, or pineal gland, which certainly has as much to do with the growth of the skeleton as the thyroid. Practically all of the giants are found to have had an enlargement of this gland. Patients who suffer from a disease of this gland in later life usually present a distinct enlargement of all the ends of the body, the hands, the face, the feet, and there can be no doubt that this comparatively unimportant looking organ, of which we know so little, has a great deal to do with the regulation of the growth of all parts of the body.

To pass over these details, however, that may seem unimportant, tho they are characteristic of the half-knowledge which professors of the various “pathies” outside of regular medicine are so ready to display ostentatiously, we may come to Dr. Still’s declaration of the essence of Osteopathy. Dr. Still says that he found in the vertebrae “most of the mechanical derangements that I know must precede disease.” “At these foramina” (the holes for nerves and arteries to pass in and out of the spinal canal), to quote his own words, “we find the seat of ninety-five per cent. or more of the lesions” (the bases of disease). That is to say, ninety-five per cent. of all the diseases to which human nature is heir is due to some pathological condition of the spinal column. To quote Dr. Still once more: “The lesion consists of a slip or subluxation of the vertebrae, causing a change in the size of the foramen and consequent interference with the nerves and vessels.” All that is necessary, then, for the medical attendant in ninety-five per cent. of human diseases is to correct this subluxation or slip of the vertebrae. This is, according to the founder of Osteopathy, the whole secret of his school of explaining and treating disease. Practically all that has ever been discovered in medicine has been a delusion, or at least it has been so superficial as to be useless. Here is absolute truth at last—ninety-five per cent. of all disease is due to a slip of the parts of the backbone. This new etiol-
ogy is at least simple enough for all to understand.

Is it possible that physicians all down the centuries, notwithstanding their careful investigation of diseased conditions, have missed this casual factor for ninety-five per cent. of all disease, until it was revealed to the investigating genius of the father of Osteopathy? It is perfectly true that in the history of medicine discoveries almost as revolutionary as this have been made, tho not in recent times. They met with opposition, too, at first, but the conservative spirit of the medical profession has by this disinclination to novelty kept 999 absurdities from being foisted on mankind for every real discovery whose acceptance it has delayed for a time.

Has the attention of the medical profession ever been especially directed to the spinal column and to the lesions that occur in connection with it? Have many autopsies been made by investigators long before Dr. Still began his studies, in which attention was devoted mainly to the condition of the vertebrae and to their possible interference with the nerve supply to the various organs, or with the blood supply to the spinal cord itself?

I may say at once that the vertebral column has been the subject of much careful study. The condition of subluxation and of slipping of vertebrae in various degrees occurs constantly in the various forms of tuberculosis of the spinal column, which is usually called Pott’s disease. The subjects of this affection are very frequently seen. The disease was even more common in the past than it is at the present time. Practically all of the people whom we see on the streets with humped backs have suffered at some time, usually in very early years, from tuberculosis of the bones of the spine. As a consequence of this, the bodies of the vertebrae, the main portion of these bones, have been eaten away and the vertebrae have slipped over one another, producing luxations, subluxations and the most curious twisted deformities.

Now here are a set of cases in which it might be expected that the symptoms which the osteopaths claim to cure by manipulation of the spinal column would surely appear. If the principle that even very slight deformities of the spinal column surely lead to serious symptoms in the abdominal organs, because of interference with their nerve supply, then we would expect hump-backed victims of Pott’s disease to be invalids of the worst kind. As a matter of fact, they are usually quite healthy. It is true that they often suffer from a special form of heart disease, spoken of as the Kyphotic Heart, from Kyphosis, which means hunchbacked, (but this is because of the mechanical difficulty which the heart experiences in performing its function in the crowded position which it has to occupy because of the bent back. As a rule, these people continue in good health unless the tuberculous process begins over again, and then, of course, they are likely to fall victims. Here we surely have the lesions suggested by Dr. Still, but the symptoms supposed to be due to them are absent.

The man who runs and reads might think from Dr. Still’s article that there had been very little time and study devoted to diseases of the spinal column before osteopathy began its work. As a matter of fact, however, medical literature teems with investigations of all kinds devoted especially to the spinal column and its various pathological conditions. Some three years ago, in writing an article on “Tumors of the Spinal Cord” for the “Reference Hand Book of the Medical Science,” I was surprised to find how much medical literature in the various languages had accumulated with regard to affections of the spinal column in the five years since I had previously reviewed the subject, the in the meantime I had considered that I was keeping myself reasonably familiar with the details of contributions to this subject. The medical journals show hundreds of careful studies of the spinal column made every year with the most careful search made for any such causes of disease as Dr. Still speaks of, with young men in every country only too anxious to obtain reputation by some such startling observation, yet without confirmation of his ideas.

Dr. Still refers to the number of cures that have been made by osteopaths as the incontrovertible proof of the truth of his doctrine of the origin of disease, and of the efficaciousness of his method of treatment. He must know very well, however, that it is always to the cures effected by him that every quack charlatan in medicine appeals. A century ago, when Perkin’s Tractors were so popular, it was exactly because of the number of so-called cures they had effected that their inventor succeeded in making a fortune. About the same time the famous John St. John Long was making wonderful series of cures of chronic rheumatism and pains and aches of many kinds by means of his wonderful liniment. This remedy was thought to be so efficacious that the British Government finally bought the secret of it from him, paying many thousands of dollars for it, in order that it might be given to the public and enable them to free themselves from most of the chronic ills to which flesh is heir. The mysterious remedy proved to be only a combination of turpentine and white of egg, with some other equally familiar substances, and, of course, just as soon as it lost the power that its mystery had commanded for it, it ceased to be effective.

As a matter of fact, most people who suffer from chronic ailments can be cured by almost any means from which they confidently expect relief. It is from among this class of persons that the cures made by Christian Scientists are recruited. The healers only persuade their patients that they have nothing the matter with them, and straightway they begin to get better, and eventually are entirely relieved. At least as many patients have been cured by Christian Science as by osteopathy in this country. Were the ailments of such persons, therefore, imaginary? Not entirely. Their sense of discouragement, however, prevented their nervous systems from exercising sufficient control over certain tissues to enable them to throw off low grade pathological processes. If the mere influence of suggestion, the only remedy of Christian Science, can accomplish so much, it is easy to understand how much may be expected from similar suggestion aided by the influence upon the mind of the repeated, systematic manipulations of an osteopath in whom confidence is reposed. The chronic sufferers who become the vaunted cures of the osteopath now belong to the
same class that have always in all ages enabled the irregular practitioner of medicine to point with pride to his cured patients, and so gain new adherents for his system. In all the history of medicine, however, not a single therapeutic measure of enduring value has ever been introduced to the notice of the medical profession in this way.

The general public seems to think as Dr. Still hints, that the regular medical profession is opposed to osteopathy as a method of treating disease. Any manipulations that will aid in the cure of disease, any rubbings that by favoring the circulation to certain parts will relieve symptoms, any massage or other physical measures that will help suffering humanity, the medical profession is not only perfectly willing, but ever ready to accept and adopt. There is only one reason for the opposition to legislation that would allow osteopaths to treat disease. The human body is, as Dr. Still says, an extremely complex machine. Those who spend a lifetime in its study are only too ready to acknowledge how little they know about it at the end. If physicians are to practice medicine and treat disease with any hope of success, they must as far as possible know all that is known up to the present time about the body and its diseases. If the osteopaths will but pass the ordinary State Board examinations in medicine, the regular profession will be only too willing to let them practice the cure of disease as they think best.

New York City.

REPLY TO THE ARTICLE OF DR. WALSH.

DR. G. A. STILL.

While reading Dr. James J. Walsh's article on "Osteopathy and Practical Medicine," I was reminded of the stock sentence of a one time professor of mine, who was continually saying, "Anything is possible in medicine." I am finally convinced; before reading Dr. Walsh's article I wouldn't have believed it possible that an educated man could make as weak an argument against anything, or that he could make as many mistakes in so short a time.

The "Adjunct Professor's" first argument is that "in an article of two thousand words not more than five hundred are employed to state the groundwork of Osteopathy," and then he calmly worries through an article of about the same length on osteopathy and medicine and doesn't employ a single word on the groundwork of medicine, except to tell how the British Government was swindled out of thousands of dollars by buying a formula for a drug. In view of the interminable number of both nations and individuals who have had the same experience buying drugs, we can believe the story.

Couldn't the "Professor of History of Medicine at Fordham University Medical School" have used what little space he did devote to drugs by telling us of one that we could buy without getting swindled?

In my own article I gave Science and particularly Dr. Harvey credit for those things which are common physiological and anatomical knowledge. To the "Professor of the History of Medicine," however, I must give credit for refreshing my memory by mentioning that it was twenty years that the medical profession kept Dr. Harvey from publishing his reports, and then when he did, expelled him from the societies and burned him in effigy. While we are at it, it is just as well to mention that Malpighi, also, was ridiculed by the same ethical profession, and that A. von Luewenhoek, who first discovered bacteria and was a contemporary of Malpighi, was so opposed and ridiculed that nothing was done in bacteriology—the present fetish of the medical men—really worth while, until the last quarter of a century. What were the "hundreds of bright young men in every country, only too anxious to obtain reputations by starting discoveries," doing all of this time? Were they all studying the spine, about which the Doctor was so "surprised to find that so much literature had accumulated during the five years preceding the time when he prepared an article on the Spinal Cord?" Possibly so, if so, they, like the "Staff of the Medical News, also the International Clinics" did their "original" (?) researches in the "literature of the past five years."

Why did they leave it to Neisser in 1879 to demonstrate that gonorrhoea (a disease so old that it is described in the Old Testament) was due to a germ as all of the medical profession now claim? Were the "young men" too young up to 1879 to be told about gonorrhoea? Was it also this delicacy that kept the spirochita pallida, whose ravages are shown on the bones of the Egyptian mummies, from being located until this year? Excusing the bashfulness of youth for not investigating the venereal diseases, what will excuse the overlooking of the tubercle bacillus until 1882, and the demonstration that scrofula and pulmonary tuberculosis were the same disease of different tissues, and it was considerably later than '82 that the general medical profession accepted the theories. And why didn't "the young men" of New Jersey note the importance of the mosquito in carrying malaria, etc. It wasn't for a lack of mosquitoes. And why, Doctor, were the X-rays left until 1895 and radium until the twentieth century. Why were chloroform and other general anesthetics unused until the middle of the nineteenth century? Why were antiseptics, asepsis, etc., unknown from the time of Aesculapius until within the memory of living man? Why, if so many keen investigators were looking for truth and fame, were such things as pathogenic bacteria, aseptic surgery, anesthetics, etc., left for modern times, although the Doctor calmly states that "nothing revolutionary has been discovered in medicine in recent times." We will tell you, Doctor. There was too much "looking up the literature" and not enough investigation. And now that you have discovered your bacteria, if you could name a drug that would cure a single case of tuberculosis, osteopathy would perish forever.

Almost at the beginning of his article the gentleman from the "Polyclinic for Graduates in Medicine" establishes a new axiom; to wit: "Professors of the History of Medicine should not attempt to talk on anatomy." Listen to this startling assertion used in attempting to correct a supposed mistake on my part—"There is a small gland at the base of the brain called the hypophysis or
pineal gland." That there was no intention to regard the hypophysis cerebri and the pineal gland as two structures is shown by the fact that in the same paragraph they are referred to four times as "this gland." Now the hypophysis cerebri or pituitary body and the pineal gland are both in the cranium, but that is about as near as they come to each other, and yet the Doctor speaks of the "half knowledge of the irregulars." All this is in criticism of my statement that the growth of the long bones is influenced by the thyroid gland. And in conclusion he describes the disease acromegaly as a result of disease of the "hypophysis or pineal gland," and "there can be no doubt that this gland, of which we know so little etc." Never was a happier statement used in literature. "Of which we know so little?" was fine. The hypophysis, Doctor, and the thyroid and the pineal, and the brain, often, and other structures are affected in acromegaly, but "the long bones are rarely affected in acromegaly," (Reference: "Hand-book of the Medical Sciences," the book you mention with such pride as being a contributor to and which contains contributions by others that could be read with profit.)

The real joke is saved for the last paragraph though. Read it. It ends with "If the osteopaths will but pass the ordinary state board examination in medicine, the regular profession will be only too willing to let them practice the cure of disease as they think best."

Why, if my freshman class in anatomy didn't know the difference between the pituitary body and the pineal gland, I would flunk them flat, and they still have five terms after this to get ready for the state board examinations, which the average osteopath finds easy whenever he is given a chance to take them.

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**AMERICAN CANDIDATES FOR THE NOBEL PRIZES.**

(Edited from the Independent.)

**Who are our great men?** That is a question we asked in our issue of March 9 last. It was not a rhetorical question. We wanted to know. It was naturally suggested by an article published in that issue giving the names, nationality and achievements of the twenty-five men to whom the Nobel Foundation had awarded its prizes in the four years during which that body has been acting. Five prizes of about $40,000 each are awarded every year respectively to the person who has made the most important discovery in physics, in chemistry, and in physiology or medicine, and who has produced the most distinguished literary work of an idealistic tendency, and who has done the most for the promotion of peace. Among these, chosen without regard to nationality, as the greatest benefactors of the human race, no American has yet found a place, and the question at once arose, have we any American worthy to rank with Rontgen, Lorentz, Zeeman, Becquerel, the Curies, and Rayleigh in physics; with Van't Hoff, Fischer, Arrehnius and Ramsay in chemistry; with Behring, Ross, Finsen and Pavlov in medicine; with Sully-Prudhomme, Mommsen, Bjornson, Mistral and Echegaray in literature, and with Dunant, Passy, Ducommun, Gobat and Cremer in international pacification.

We were not able to answer this question to our own satisfaction, and therefore we referred it to the most intelligent body of individuals we know of, namely, our readers. They gave it up, too. Several other papers took up the query and spread it among their readers with an equally unsatisfactory result. We are a patriotic people and willing to proclaim in the strongest possible terms on Fourth of Julys, and even on other days, that this is the greatest nation on the face of the earth and leads the world in science and literature and peacemaking, but when asked for specification we are more diffident. With one exception, discussed below, the votes were too few and scattering to be worth reporting.

Most of those whom we approached personally upon the subject promptly expressed a willingness to vote for a candidate in one or more of the five classes and with equal readiness they usually objected to the names we had suggested, but when pressed for better names they almost all asked for a postponement of the query to give time for further consideration. We have had since no reason to think that said consideration has been effective.

As was to be expected, more persons felt themselves competent to express an opinion upon the candidates in literature than upon the scientific subjects. We suggested, not as expressing our own opinion but merely to stimulate thought the names of Allen, Burroughs, Cable, Carman, Clemens, Mrs. Freeman, Hale, Howells, James, Loudon, Stedman, Mrs. Ward, Mrs. Wharton. To this list several of our readers have added the names of Borden P. Bowne and William Vaughn Moody. If it had been a question merely of literary eminence the vote would have gone for either Howells or James, but most of those who suggested them expressed a doubt whether the work of such representative realists could properly be called idealistic in tendency.

In regard to the peace prize, President Roosevelt has, since the question was raised, become most conspicuous for his activity in bringing about the conclusion of the Russo-Japanese War. Next to President Roosevelt, Congressman Bartholdt has been most often spoken of for the Nobel Prize, and the American delegation at the Interparliamentary Conference held in Brussels last August petitioned the Norwegian Government to grant it to him.

Very unexpectedly to us, our readers took more interest in the candidate for the medical prize than any other. This was due to the fact that a boom was started for Dr. A. T. Still, as having made, in osteopathy, the most important discovery in physiology or medicine. The osteopathic journals took it up and prepared petition blanks and postal ballots, which were circulated with such enthusiasm and success that we received altogether 22,061 votes for Dr. Still. Many of these were accompanied by letters indicating great reverence and affection for "the old doctor" and gratitude for benefit derived from his treatment.

The geographical distribution of the votes is interesting as showing the way such popular movements spread. Starting only about fifteen years ago in Kirksville, Mo., without initial prestige and against strong opposition, it spread rapidly thru the neighboring States of the Mississippi Valley and then to all
parts of the country. Every State and Territory and Alaska, Canada and Mexico are represented in the votes we have received, but most of them come from the following States, and probably the number of votes indicates in a rough way the relative strength of Osteopathy in these States: Missouri, 15,207; Illinois, 880; Ohio, 532; New York, 467; Texas, 419; Iowa, 307; Tennessee, 269; Michigan, 240; Colorado, 225; Pennsylvania, 205; Arkansas, 201; California, 200.

The pros and cons of osteopathy have been adequately presented in our last two issues, so we cannot devote any more space to the discussion. Here we are only concerned with its bearing upon the question of selecting our greatest men. In our former editorial we stated our opinion that a popular vote could not decide the matter. Possibly our skepticism of the value of such a referendum deterred our readers from taking part in it. At any rate, our skepticism has not been removed by the result. While it is, as we then said, an excellent topic for thought and conservation, the final decision as to the value of a scientific discovery, in medicine as well as in chemistry and physics, must be felt to posteriority. And if we are not willing to restrain our curiosity, or to allow a public benefactor to go to his grave without due recognition from his contemporaries, we must take our opinions chiefly from those who by training and position are better qualified than the average man to form a sound judgment upon such technical matters.

Fortunately for the world the foresight of Alfred Nobel, maker of dynamite, has provided just this needed apparatus for the appraisement of purported discoveries. About $13,000 are spent in the examination of the claims of candidates and other administrative expenses for each of the $40,000 prizes. It is particularly stipulated in the statutes (sec. 7) that the medical prize shall only be awarded after a special investigation by the Medical Nobel Institute. We hear on every hand of marvelous cures wrought by new therapeutic methods some of which strike us as plausible, some doubtful and some absurd; all of them, however, vouched for by numerous followers, whose good faith and intelligence cannot be denied. The average layman has not the training, the average practitioner has not the time, to decide between these conflicting claims. To have them adjudicated by so competent a body as the Nobel Institute is a public service of great value to the world.

Proposed curative methods yet denied recognition by orthodox science, have in this an unexampled opportunity to prove their claims. We recommend our osteopathic friends not to be content with their present victory of popular votes, but to take the necessary steps to bring their cause before the Nobel Commission, to be passed upon by the Caroline Medical Institute of Stockholm, as described in our article of March 9. That this tribunal is ready to recognize new and revolutionary medical methods is shown by their putting the stamp of approval upon Finsen’s light cure within seven years after its discovery.

The announcement of the awarding of the Nobel prizes is made upon the founder’s birthday, December 10th, and it is awaited with considerable interest to see if America has yet found admission into this living Hall of Fame.
urged that function produces structure, it must be admitted that the product is the result of structure in action. Hence, function is the vital manifestation, of structure, and abnormal function implies abnormal structure. Therefore, derangement or disturbance of structure is the cause of derangement or disturbance of function.

**Function of the Blood and Nerves.**

The importance of blood circulation for purposes of nutrition, on one hand, and the removal of waste and worn out material, on the other, is well understood, as is also the importance of the nervous system in originating and transmitting impulses which control the activities of the various glands and tissues. The blood-vessels and nerves, therefore, contain the fluids and forces essential to cell-vitalization and the performance of the physical and chemical processes of the body.

While the nervous system is dependent upon the blood for nourishment, the blood-stream is under the control of the nervous system; not only indirectly through the heart, but directly through the vaso-motor nerve-fibers which regulate the caliber and rhythm of the blood-vessels. The nervous system also originates the accelerating and restraining impulses which produce and maintain the rhythmical movements on the part of structure primarily essential to normal function.

**Primary or Real Causes of Disease.**

We refer to the primary or real causes of disease as structural irregularities, defects, derangements or lesions, such as a dislocation or slight deviation of bony structures; displacement of organs, muscles and ligaments, resulting from falls, blows, strains, etc.; contractured muscles and ligaments, resulting from exposure to cold, dampness, etc.; alteration in the relation of structures resulting from a continued abnormal posture assumed in certain vocations or from carelessness.

It should be noticed that structural lesions are produced by at least one of the three following agencies: accident, exposure or abuse. We do not refer to these agencies as causes, for the reason that they produce a structural derangement which must be regarded as the cause of the disease that follows.

The cure for disease is removal of the cause; hence, the thing removed to accomplish a cure is considered the cause. That an accident is in the past tense does not cure the ill effects resulting from the displaced or injured structures. To discontinue a vocation that produced fixed alteration in the relation of structures does not cure the consequent disease. To remain in doors after exposure to cold does not cure a resulting bronchitis. To say that a case of tonsillitis was caused by exposure to cold is incorrect from an osteopathic view point. To remove the exposure does not cure the tonsillitis. The exposure, as an agency, produced, we will say; contraction of the muscles of the neck, and the contracted muscles caused tonsillitis by affecting certain nerves and stagnating the blood-supply of the tonsils. Correcting the abnormal muscular condition resulted in a cure; hence, the contracted muscles were the cause.

Structural defects or derangements are at least predisposing causes. That is, while they may not produce sufficient disturbance to constitute disease, they render the system susceptible to other causes. They are liable at any time to act strongly enough to cause a departure beyond the physiological limit, and if they do, they at once become exciting as well as predisposing causes.

**How Structural Lesions Cause Disease.**

The effect of a structural lesion is pressure on adjacent tissues. If the derangement be a rib lesion it may press directly upon lung tissue and prevent proper expansion or rhythm of the organ. A depressed collar bone may impinge the blood-vessels and nerves which pass under it. A slightly turned vertebra in the neck may exert more or less pressure on the vertebral artery and affect the circulation to the brain. Bony lesions, such as a hip dislocation, vertebral and innominate deviations, as a rule, draw the softer tissues out of line, and this disarrangement or the tension of the ligaments and muscles causes an abnormal pressure on associated blood-vessels and nerves. When we speak of pressure on a blood-vessel we do not mean that the vessel is entirely occluded. Such a condition would, of course, result in gangrene. A very little abnormal pressure, however, will lessen its caliber and exert a marked influence on the part nourished or drained by it. Pressure on an artery diminishes the amount of blood to a part; pressure on a vein causes too much blood to remain in a part. Pressure on a nerve, sufficient to cause degeneration of its fibers, will produce paralysis or wasting of the part it supplies. A slight pressure, however, will irritate it excessively and affect the part it supplies accordingly. While a great structural lesions involving nerves act by direct impingement, causing excessive accelerating or restraining impulses, according to the function of the fibers or nerve-center affected, the majority of lesions, especially spinal, first interfere with the blood-supply of nerve-centers by compressing the arteries or veins. In this way the nutrition of a nerve center, as well as its accelerating and restraining impulses, are impaired for want of nourishment or are exaggerated on account of cell-irritation by stagnant blood.

Contractured spinal muscles are a very prolific source of disease. These contractures often disappear under the reactive and self-adjusting powers of the system, but not unfrequently persist and ultimately affect the nutrition of nerve-cells in the manner just indicated or by impingement of centripetal nerves. Thus, in either event, abnormal impulses originate and pass through centri­fugal nerves, disturbing the harmony or rhythm of the organ or part they supply. Spinal lesions, therefore, cause disease by involving the blood-vessels and nerves, either preventing proper nutrition of the nerve-centers and consequently weakening their impulses, or through the medium of stagnant blood or impingement of centripetal nerves, irritating nerve-centers and consequently exaggerating their impulses.
FAIR LEGISLATION.

DR. F. P. YOUNG, KIRKSVILLE, MO.

In this paper it is the purpose of the writer to present some of the essential features of a fair law recognizing the practice of osteopathy and some of the reasons why such a law has not been obtained. The intent of medical law is, not to protect the practitioner, but to protect the public from the ignorant and incompetent. The average business or professional man, even though he is in good health, is unable to determine the competency of a physician, and when he is prostrated by illness, is obviously unable to distinguish the ignorant from the competent. The public is also entitled to know whether a physician is able to recognize the various communicable diseases and to safeguard the community against their ravages. Therefore, educational qualifications for physicians are necessary, and to determine which, examining boards are necessary.

Before courts of law all schools of healing are treated alike; as to efficiency no one is recognized as superior to another. So also should the laws in the various states establish the same standard of qualification for all physicians. In the history of our science it became necessary at times to effect bad compromises in order to secure any legal recognition. The law thus secured gave the osteopath but limited rights, he not being allowed to practice surgery, or if so, but minor surgery, perhaps not obstetrics, and in other ways seriously cripples his usefulness. In addition to having his rights curtailed he was pointed at, and still is in many states, as a "limited" practitioner. The first and most essential reason why such compromises were necessary was that the course of study of no osteopathic school gave its graduates a complete education in all branches of the healing art. The second reason for such compromises was the fierce opposition met at the hands of a well organized band of prejudiced physicians of other schools. A poor law was accepted rather than none at all.

Since a longer course of study has been adopted by the various colleges of osteopathy and the curriculum has been made complete in every detail there can be no valid reason why the osteopath shall not be recognized equally with any other physician.

The writer greatly regrets that the American Osteopathic Association should have adopted as an ideal bill one which on its face is a confession of weakness and which makes the holder of a license under such a law a limited practitioner. The bill does not require a knowledge of general surgery. The framers of this bill have declared that it is not necessary for the osteopath to become qualified so that he may know if amputation is necessary in case of gangrene or in case of injury. It is not necessary that he know when operative procedures are indicated in pelvic abscess or, in fact, any supplicative condition. Think of the many surgical diseases and conditions he is not to know anything about. Strangulated hernia and its treatment or the cure of any form of hernia, lacerations of the uterus and perineum, the Lorenz operation, reduction of some of the recent dislocations, the treatment of certain fractures, etc., while surgical interference in tumors of the pelvis or abdomen shall be recommended, I suppose, when the patient himself especially so desires. The osteopath is supposed never to have heard of actinomycosis, malignant pustule, septicemia, pyemia, surgical tuberculosis, tetanus and similar diseases except by accident perhaps; and as far syphilis, gonorrhea and venereal cases are concerned we will simply have nothing to do with them. The sooner the laws are framed requiring all those entering upon the practice of osteopathy to take an examination in general surgery the better it will be for the profession in general. The time is certainly ripe for such a step. It should be remembered that this will in no way affect those already in practice. No one is going to attempt surgical practice without special training.

Another feature of this bill which is especially pernicious is the requirements of candidates for license to practice. I would respectfully call your attention to the subjects in which the candidate is required to pass an examination. They are as follows: "Anatomy, physiology, physiological chemistry, toxicology, osteopathic pathology, osteopathic diagnosis, hygiene, osteopathic obstetrics and gynecology, minor surgery, principles and practice of osteopathy and such other subjects as the board may require." In addition to the fact that the candidate need not know anything about general surgery or surgical diseases, he need not know anything about bacteriology, general pathology, diseases of the eye, ear, nose and throat, skin diseases, venereal diseases and medical jurisprudence unless the board should so choose. Would it not look better to include these subjects in our requirements? The question might be asked, "Can our graduates pass an examination in all these subjects?" In so far as the graduates of the American School of Osteopathy are concerned I would answer in the affirmative. I believe none of our schools or their graduates would be hurt by such requirements. It would look reasonable, too, that it would be easier to secure recognition before legislatures if such were the requirements. There is one other point in the bill where the writer differs from most of the profession and that is on a separate board of examiners. Other things being equal, a mixed board representing all schools of healing is best. Candidates can just as readily pass the examinations and it gives this additional advantage in that it places all physicians precisely upon the same level. The writer would not contend strongly for this point although feeling that it is best. The only argument which can be advanced against a mixed board is that the candidate can not secure justice. It has not yet been shown in any instance that this is true.

I believe no one will deny that what the entire profession desires is equal recognition with other physicians. It would be obviously unfair to grant the osteopath such recognition, investing him with power to treat all diseases when his educational requirements are no better than would be indicated by
this bill above mentioned. The writer would not create the impression that
the osteopath is not qualified and that he is not entitled to equal recognition
with other physicians. The fact is, he is qualified, and this qualification
should be reflected in our laws. I believe if we had representation on the
various medical boards and our graduates were permitted to take the examina-
tion they would experience no trouble in passing. In Indiana the medical
board will not permit osteopaths who graduated after March, 1903, to take the
examination. The board is invested with arbitrary powers permitting it to
establish the length of course of study. The board thus ruled that a candidate
must have attended a course of study consisting of four terms of not less than
six months each spread over four separate years. An osteopath after having
attended three courses of nine months each is better qualified, having attended
school longer, yet he is not permitted to take the examination. The injustice
of such a law is plain.

What should be sought is equal recognition. To secure this let us place
our standards high. Require examinations in all branches taught in osteopathic
and medical colleges, excepting materia medica and therapeutics only. A
three years' course, as has been inaugurated in our colleges, will qualify our gradu-
ates to pass any mixed or separate board of examiners providing they are per-
mitted to take the examination and are treated with fairness. If fairness can
not be secured by representation upon the medical boards then a separate ex-
amining board should be sought for. Concerted efforts to this end should re-
sult in satisfactory laws. Time will show that the osteopath can be as well
qualified in three years as a medical practitioner can in four years since he
is not required to study the nature and chemistry of drugs nor their physiolo-
gical action upon the human body.

A thorough discussion of this subject can not but do good. It is certainly
of the most vital importance to the whole profession.

AN OSTEOPATHIC STUDENT'S EXPERIENCE.

804 W. Pierce Street,
Kirksville, Missouri, Nov. 11, 1905.

My Dear Sister:—

Your kind letter was received and much enjoyed. The work of the Junior
term keeps one so busy that letters are not answered as promptly as aforetime.
As to your queries concerning osteopathy, I will quote from your letter and
then try to answer in the plainest terms possible. "Ever since Mrs. Cartwright
went away I have wanted to ask one some who knew if this is the theory of the osteopaths. This is what she told me: In every ailment that flesh is heir
to, there is a bone out of place somewhere which is the cause of said ailment. For the sore vertebra in the middle of my back she said the cause was some rib slipped out of place. I laughed and asked, 'How about a common cold?' She answered soberly, 'Oh! there is a little bone out in the neck.' It does

not seem as though anyone could hold such a doctrine as this.

It is not necessary in every ailment for a person to find a bone out of place as
may be instanced in, say, a cold attacking certain muscles after sitting in
some draughty place. You well know a congestion and an enlargement of
these muscles would follow and should they press upon or crowd any vein,
artery or nerve, as much trouble would result as though a bone were out of
place. Should the drainage of your house become obstructed the waste water
would back up, overflow or burst the pipes, get stagnant and smell bad. This
is also the exact condition in the body if in any manner the veins are hindered
in their perfect drainage, only that you have added thereunto, pain and fever
and a long list of ailments. Should the water supply be shut off from your
household your family will get thirsty; continue the shut-off, they die. Just
so with the arteries of the body; let them, by pressure or injury, be shut off and
be prevented from sending the normal supply to some part and death of the
part must in time follow. You would almost need to take a good course in
dissection in order to see how slight a misplacement of muscle, rib or vertebra
it takes to bring about far reaching troubles. The pressure upon the vein will
hinder perfect drainage; upon the artery, the necessary supply of good, rich
blood; upon the nerve, paralysis and an interruption of normal function. The
pain and suffering is the cry of nature for pure blood and perfect drainage.
To illustrate this more clearly I will cite you my own case, which, as you well
know was the severe throat affection with the loss of hearing. Dr. Still or,
as he is familiarly known in Kirksville, the "Old Doctor," diagnosed my case
at once, saying "the upper ribs on right side are out of place, hindering good
blood supply to ears and head, as well as drainage from same." Then he gave
instructions for adjustment of ribs and vertebrae, the result of which is, I am
happy to tell you, such an improvement in the hearing as to make it unneces-
sary to sit on the front seat in the lecture room. How difficult it was to hear
the lectures during the Freshman and Sophomore terms!

After any ailment, except the parts have degenerated, by adjusting the
structure and bringing about a normal circulation of all the fluids of the body,
normal function returns. To give you a brief definition I will say, osteopathy
is the science of structural adjustment of the human body, based upon the
principle: normal structure, normal function. This is what it means to me,
and structure means the whole anatomy, not alone the bony man.

Just think for a moment; the opening in the neck circumscribed by one
vertebra and the two first ribs has passing through it into the thorax below,
not less than forty separate structures—muscles, nerves, veins, arteries, etc.—
each with its own special work to perform. They are arranged with infinite
wisdom and act in absolute harmony, carrying on a perfect work until through
ignorance, overwork, injury or abuse; vertebra or rib is thrown out of its proper
place, then trouble enters the ranks of the forty, and it is the osteopath's work
to re-adjust the misplaced structure and nature's work to repair the damage

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done. If the damage is slight, the cure is instantaneous, or practically so; if more serious, then a longer time is needed, but for nearly all parts of the body, repair is possible.

One of the tissues impossible to repair is nerve cells that have degenerated. In such cases no others can be grown to take their places, although the degeneration started may be stopped by osteopathic measures with improvement in the general condition, but there is always impaired function in the part affected, as seen in some of the paralyses. For the "sore vertebra in the middle of your back" with "the slipped rib"—well, my good sister, if you were only here for ever so short a period, we could show you, with the aid of the Doctor's "little monitor," the thoracic brace, against which you would lean while the osteopath would raise and set your rib in its natural position, that the soreness you write of would disappear almost like magic. Having had this experience I can assure you it is no fairy tale, but an actual fact.

You asked also about the "common cold," one in which you get a sore throat. You well know what happens: the muscles in your neck enlarge, thicken and become painful. Every muscle is attached to one, two or more bones, hence if it thickens it must be at the expense of its length and if each end is attached to a different bone it is surely the most certain result in the world, that the bones are pulled toward each other and out of line. Through the opening formed by these bones in the neck come veins, arteries and nerves, supplying many parts of your body; these, if impinged upon, hinder or obstruct both supply and drainage. Take this simple instance: you hit your "crazy bone" (or rather you press the nerve there) and realize a tingling to your finger tips; just imagine that pressure continuous and estimate the consequent result. Then carry your thought up to where that nerve leaves the spinal cord and passes out through the openings in the vertebra in your neck, pinched because the bones are drawn out of place by the contraction of the muscles; surely the result is plain to be seen, when you realize that veins and arteries are pinched also. When obstructions occur in your house drains and water supply you do not let the sun go down till the plumber is brought to right the trouble; but the physical body, the house of the Immortal Soul, can worry out or wear out its obstructions. The old idea that the ailments of the human family must have their run is now an exploded theory. The run for a human plumber should be made a matter of greater speed than for the house plumber. The day may come when the human plumber can receive wage only when the human body is kept in order. Then the common cold and influenza will be practically unknown, because if given into the hands of the osteopath at once, one or two treatments will be all sufficient for a speedy cure.

If you should not find herewith that which clears the questions in your mind, phrase them some other way and I will answer as best I can.

Trusting you believe the old adage "that the proof of the pudding is in the eating," and are willing to give some good osteopath a chance to show you the truth of the above, I am, with love to all the family,

Your sister,

Ella B. Veazie.

EX-GOVERNOR HOGG CURED BY OSTEOPATHIC TREATMENT.

Texas Letter.

The next meeting of the Texas Osteopathic Association will convene in the wide-awake little city of Waco in May. A few years ago the state press gave scant consideration to our body and less to our practice. The gradual extension of our practice among the influential element in various portions of the state, is securing greater publicity and as a result broadening our field of operation. This has been forcibly illustrated recently in the case of Ex-Gov. James Hogg, than whom no other man has a stronger hold upon the confidence of the masses. As the result of a railroad wreck some time ago his health gave way.

Dr. Lynd of Houston was called into the case and accompanied him to Fort Worth where the M. D's. insisted on performing an operation, being opposed by the osteopath. The latter's advice was followed, but the M. D's. daily bulletins ignored the attending osteopath entirely, so the public did not know that the latter had any thing to do with the case at all, though the Governor was being treated two or three times every day. When he learned that Dr. Lynd had been thus ignored he told the reporters to give due credit to him. Since then the dispatches have had more to say about the part osteopathy has played in the big Ex-Governor's progress—his death being inevitable, according to the M. D's., without an operation. All of which goes to show the narrowness and bigotry of at least some men in the drug profession and how such things are promoting the growth of a respect for osteopathy.

Dr. McCormack, chairman of the organization committee of the American Medical Association, is making a tour of the state, urging a stronger and more compact organization of the medical fraternity. He took occasion to speak his mind in no uncertain terms concerning other schools, the whole drift of the address being that only the elect, i. e., "the regulars" should be permitted to determine who should practice. Here are some expressions that we osteopaths may ponder with profit: "Medical men should enter politics. They should go to the legislature. There is much work for them there. What does the lay mind know of the proper means to keep proper sanitary conditions of our rivers and cities and canals?" Of course those of us that have watched the methods of the American Medical Association in their efforts to thwart a "fair deal" well know their chief concern in the state legislatures is not to look after the sanitary conditions of our "rivers, canals and cities." With a beautifully woven drag-net he reached out after the clergy in this style: "The clergy as a class do a world of good. No one acknowledges that more fervently than I do. But we should all work together. Our laws should be amended... I con-
sider Alabama an ideal state in this respect, for the medical profession plays such an important part in the making of her laws. The time will come within the next generation when we shall all work together for the common good so that the medical profession will be the great force in our affairs.” As a further evidence of the real purpose of this itinerary of Dr. McCormack, a movement has just been launched in this city to secure a joint meeting of the lawyers, medical doctors and the clergy, to “devolve some plan which would result in the passing of laws that would redound to the good of the citizenship at large.” Lacking courage to come out in the open and say unequivically just what legislation they desire, the drug doctors propose to veil their real motives until they can hoodwink the lawyers and clergy into believing that the scheme is solely for the public weal. I believe osteopathy has yet its greatest fight to make. The legal recognition we have secured has been due, in a measure at least, to the unpreparedness of the drug doctors. But they are quietly organizing their forces and aiming to secure the cooperation of other influential bodies to carry any measure they propose in the various state legislatures. It behooves every osteopath to identify himself or herself with the state organization of his or her state to prevent the consummation of this selfish and tyrannical aim of the American Medical Association.

Dr. Maud Russell brough a patient to Dallas recently for operation for cancer of the liver. The case was of so much interest that I have asked her for data for a review which I hope to give in the next issue of the Journal.

Dr. M. B. Harris, of Fort Worth, recently had the distinction of having an indictment drawn against him for practicing obstetrics. The judge threw the case out very promptly to the dismay of the over zealous M. D. and the gratification of the osteopaths of the state.

Texas is a big empire within itself and has many good towns in which osteopathy is not represented. We want at least one hundred strong, wide-awake men and women to locate in these places. It should be understood, however, that pioneer work is sometimes slow, but with grit and a knowledge of what osteopathy is capable of doing in the hands of trained practitioners I think success is certain in any place where other schools succeed.

JAMES L. HOLLOWAY, D. O.
without distinction as to rank, then, in our opinion, a composite board before which practitioners of all schools are required to take the same examinations except on therapeutic lines, would be an ideal board.

A composite board conducted as we have assumed would give to each profession its just rights and place them all on an equal basis.

But we must seek legislation to suit conditions as they really are, not as we would wish them.

So long as the medical profession occupies a bigoted, know-all-that-is-worth-knowing position; so long as regular medicine has a knife up its sleeve for osteopathy; so long as osteopaths are required to accept inferior positions on examining boards in order to get any recognition whatever, then the composite board is impractical.

The independent board has proven itself to be the most satisfactory form of legislation for the osteopath under the existing condition of affairs. Where legislation is to be sought this year we trust the profession will stand firmly for the independent board and accept no compromise from the medical profession that will place the osteopath in the inferior position of a limited practitioner.

G. M. L.

A New Edition

of Dr. Charles Hazzard's "Practice of Osteopathy" will be ready about January 1st, 1906. This will be the 3rd edition of the work, which will be entirely rewritten and considerably enlarged. The value of the work will be much increased in view of the added years of experience in the practice of osteopathy which the author enjoys, as well as of the important advancements the Science of Osteopathy has made since the publication of the second edition.

Dr. Geo. M. Laughlin Appointed Insurance Examiner.

On November 20th, 1905, President E. P. Nelson, of the Missouri State Life Association, appointed Geo. M. Laughlin, D. O., examiner for that company. We believe that Dr. Laughlin is the first osteopath, without an M. D. degree, to be appointed examiner for an old line insurance company.

A Few Facts About the A. S. O.

The three thousand graduates of the American School of Osteopathy are always eager to learn more about their Alma Mater and especially are they pleased to hear of progress in school work and equipment.

The work and advertising of the A. S. O. have been carried on with so little of brag and bluster that many people have taken it for granted that the equipment was meager, and on account of this conservative spirit, the school has suffered frequently from misrepresentation both from within the profession and without. A plain statement of the facts makes most interesting reading.

The Main Building contains 48 rooms, 4 of which are large lecture rooms with combined seating capacity of over 1000.

The laboratory and teaching equipment furnish the greatest surprise to those unacquainted with the work of the school. The laboratory apparatus alone, exclusive of furniture and fixtures, totals on a conservative invoice close to ($9,000.00) nine thousand dollars distributed as follows:

- Histology, Pathology and Bacteriology:
  - Seventy microscopes: $2900.00
  - Microtomes, balances, incubator, ovens, and other apparatus: $299.00
  - Bones showing process of disease: $100.00
  - Wax models of skin diseases: $500.00
  - Dyes, stains and chemicals: $75.00

- Chemistry:
  - Analytical balances, polariscope, nitrogen app., etc.: $460.00
  - Students' desk apparatus: $275.00
  - Chemicals: $160.00

- Anatomy:
  - 28 anatomical models: $300.00
  - Dissection tables: $110.00
  - Framed anatomical plates: $43.00
  - Skeletons and parts: $200.00

- Physiology:
  - Apparatus cost over: $2000.00

- General Equipment:
  - X-ray equipment: $900.00
  - Stereopticon equipment: $150.00
  - Stereopticon slides (1100): $300.00

The chemical laboratory has desk room for 45 students. The heating plant is being removed from the building and another chemical laboratory will be installed. Giving
a total laboratory equipment for from 75 to 100 students working at the same time.

The Histological and Pathological laboratories can accommodate some 45 students. The Anatomical laboratories are at present equipped for 72 students but this being found inadequate a room for this purpose, 40 by 60 feet, has been built over the new engine house.

The arrangement for laboratory Physiology is not satisfactory to the management and larger quarters will be provided this winter with the latest improvements in equipment.

The New Hospital and Clinical Amphitheater is a building 80 by 100 feet and contains 17 private rooms and two wards for patients, kitchen, dining room, operating rooms, reception room, nurses’ rooms, and the other rooms necessary for such an institution; besides these there is in the east wing an amphitheater with a seating capacity of 275. When finished this will be one of the most, if not the most, completely equipped hospitals in Missouri.

To sum up, this school uses three buildings containing nearly 100 rooms, and will have before the close of the school year a seating capacity in the class rooms of over 12,000; and eight laboratories with something near $10,000 worth of apparatus.

** Mrs. Leffingwell’s Boots.

This exceedingly popular play was given early in November at Quincy, Ill., and the faculty and students of the A. S. O. took a special train and went to see the performance. The train was made up of nine coaches, profusely decorated in the school colors—crimson and black—and carried a very enthusiastic crowd.

The play is a thrilling comedy and is considered one of the best written by the brilliant Mr. Augustus Thomas. The play ran for many nights in New York City and was exceedingly popular with large audiences each night. The fact that “Dr. Rumsey,” a regular, who has been cured by osteopathy and converted to the principles of the science, at a critical moment in the play gives an osteopathic treatment to one of the principal characters and eures him of a form of insanity and thus brings all to a happy conclusion, is really the climax of the production.

A magnificent bouquet of chrysanthemums and a pennant of red bearing in letters of black “A. S. O.,” was presented to “Dr. Rumsey,” who gracefully accepted them and gave them a prominent place on the piano where they remained the entire evening and attracted much attention.

It is often asked, what motives prompted Mr. Thomas to write a play in which osteopathy holds such an important part. They are said to be two—first, he is a man who recognizes what is popular and incorporates it in his plays, and second, it is a graceful and happy way he has of paying a debt of gratitude for service done in his own family by osteopathy.

** NEW CLASSES.

A new class will be organized at the American School of Osteopathy on Jan. 29, 1906. Those intending to study osteopathy should send now for catalogue and information.

A new seven month post-graduate class will begin at the same time. The new hospital will be opened during the term.

** To Subscribers.

After June 1st, 1906, the subscription price of the Journal will be raised to $1.00 a year. Until that time subscriptions will be received at the present rate of 50 cents per annum.

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Died, December 3, 1905, Andrew Taylor Still, son of Dr. and Mrs. C. E. Still. Andrew was eight years old, bright and with a lovable disposition. His death was due to a secondary attack of laryngeal diphtheria. The whole osteopathic profession join with his bereaved parents in mourning his loss.
Michigan Osteopaths Organize.

The Wayne Co. Alumni Society of the American School of Osteopathy was organized Oct. 1st, 1904, for the purpose of maintaining the purity and integrity of osteopathy, both in principle and practice as represented by Dr. Andrew Taylor Still; to defend the Founder and the American School from all unjust attacks, and to promote osteopathic education and safeguard its interests; to uphold the necessity of osteopathic instruction and training as a basis of medicine and surgery; to bring about cooperation and co-ordination of all osteopathic practitioners and to promote by study, conference and discussion the efficiency of all osteopathic work.

The annual meeting of this society is held on the third Tuesday of January of each year.

The regular meetings are held on the third Tuesday of each month except January.

The officers are: Dr. H. E. Bernard, president; Dr. Emilie Greene, vice-president; Dr. Anne McGavock, secretary and treasurer.

Detroit, Nov. 10, 1905.

Call to Osteopaths in Southwest Iowa.

Creston, Iowa, Nov. 5, 1905.

FELLOW OSTEOPATHS:—

Feeling the need of an association of osteopaths in southwest Iowa we invite the profession to meet with us in Creston, Iowa, December 5th, 1905, to effect such an organization.

We suggest for a programme that each one attending report an interesting case he has treated.

We are inviting a representative of the A. S. O. to meet with us and will report our success later.

Please inform us if you can be with us on the above date.

Fraternally,

S. H. Runyon,
Geo. F. Wagoner,
Margaret B. Runyon,
Lillie E. Wagoner.

Nebraska State Meeting.

By some oversight the report of the Nebraska meeting was omitted from our last issue.

The osteopaths of the state held their annual convention yesterday in the rooms of the Young Men's Christian Association, Omaha. Routine business took up the forenoon and the afternoon was given to addresses of a technical character. Two of the most instructive addresses were by Dr. C. E. Still of the American School of Osteopathy at Kirkville, Mo., and Dr. C. E. Thompson, head of the Still college at Des Moines.

Lincoln was chosen as the place for the next meeting. It will be held in September and the date will be set by the executive committee.

The former committee on legislation was instructed to use its efforts to secure representation for the osteopaths on the State Board of Health. The committee was commended for its work during the last session of the legislature.

Officers were elected as follows: Dr. C. B. Atzen, Omaha, president; Dr. Bowers, Lincoln, vice-president; Dr. Runyon, Seward, treasurer; Dr. C. W. Farwell, Omaha, secretary.

The Los Angeles County Osteopathic Association met on Thursday, Nov. 18th. Dr. Tasker presented an interesting case of Raymond's Disease.

The Milwaukee Association will hold a clinic on Pediatrics the first Tuesday in December.

The Philadelphia County Osteopathic Association held its regular monthly meeting Nov. 8th, 1905. Besides the regular business of the association two interesting papers were read, one entitled Nephritis, by Dr. E. D. Burleigh, and the other The Osteopathic Lesion in Nephritis by Dr. M. H. Bigsby. The association meets again Dec. 5 and will have on the program Drs. C. W. McCurdy and M. W. Pressley.

Chicago O. A.

Dr. C. P. McConnell lectured on "The Osteopathic Lesion" before the Chicago Osteopathic association on November 23rd.

The next post-graduate course at the A. S. O. opens January 29, 1906.

The Greater New York O. S.

The following announcement appears in the program of the Greater New York Osteopathic Society for the meeting November the 25th.

The Society this month is to be honored by the presence of Dr. Marion E. Clark of Kirkville. The subject with which he deals in his address, is one to which he has devoted much investigation and study. From his great experience in this department of osteopathic therapeutics, his conclusions as to results to be obtained, will be of very great interest. At the close of his address Dr. Clark will be glad to answer all questions relating to this subject.

New Jersey Association

Met on October 14 and discussed the coming legislative battle in that state. The retiring president, Dr. Forrest Preston Smith, delivered an address on the attitude of the medical profession of New Jersey toward osteopathy. The following officers were elected: President, Dr. Charles E. Fleck, of Orange; vice-president, Dr. Violetta S. Davis, of Newark; secretary and treasurer, Dr. Harvey S. Carlisle, of Paterson; executive committee, Dr. Charles Bliss, of Elizabeth; Dr. John H. Murray, of Trenton, and Dr. Addison O'Neil, of Ridgewood.

Fined for Practicing Without License.

Dr. Leslie M. Bean of Vinneennes, Ind., was fined October 29, for practicing osteopathy without a license.

The fourth annual meeting of the Central Iowa Osteopathic association will be held at Webster City, December 29, 1905.

Wanted.

Our copies of the August and November Journal are all exhausted and we have requests for a number of each for filling purposes.

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Personal Mention.

Dr. J. W. Banning has opened an office at 748-Ellicott Sq., Buffalo, N. Y.

Dr. Arthur Cunningham has purchased the practice of Dr. Dennis O'Hagan at Fort William, Ont.

Dr. C. E. Abeggton has purchased the practice of Dr. J. C. McFadden at Waitsburg, Wash.

Dr. Lenna Prater has located in Springville, N. Y., where she will practice her chosen profession.

Dr. Carl D. Clapp has opened offices in 52-53 Gardner Bldg., Utica, N. Y., where he will be permanently located.

Dr. F. L. Antes announces that he has opened offices for the practice of osteopathy at 15 Greeves St., Kane, Pa.

Dr. Clara Davis, of Bowling Green, Ohio, recently visited the A. S. O. She was returning from an extended tour through the West.

Drs. Wm. C. and Harriet B. Stephenson have opened offices for the practice of osteopathy in the Adams Bldg., Johnson City, Tenn.

Drs. King & King have sold their practice at Fergus Fall, Minn., to Dr. W. Hoefling and have opened offices at Walpleton, N. D., and Breckendridge, Minn.

Drs. Eleanore and Ida Moore write that they wish to encourage others by stating that they successfully passed the Indiana State Medical Board examination.

Dr. A. D. Ray, of Cleburne, Texas, was quite ill during October, suffering from an attack of typhoid fever. We are glad to learn that he has entirely recovered.

Dr. Emma Wells, whose father died recently, has given up her practice in Moundsville, W. Va., and returned to her old home in Ben's Run to care for her mother.

Dr. H. K. Benneson, of Clay Center, Kas., recently brought Jno. Steppe, of Wakefield, Kas., to the Infirmary for treatment and incidently visited the school and some of his old friends in Kirkville.

We are informed by Dr. E. C. Crow, secretary of the Indiana Osteopathic Society, that in the examination before the State Board, Oct. 3, 4 and 5, which was taken by nineteen osteopaths, Dr. Alice E. Hough...

Born—To Dr. and Mrs. W. P. Abell, of Palmyra, Mo., Nov. 15, a son.

Born—To Dr. and Mrs. L. A. Kissinger, of Beloit, Kas., Nov. 14, a son.

Born—To Dr. and Mrs. D. L. Conner, of Phoenix, Ariz., Oct. 11, a son.

Born—To Dr. and Mrs. W. F. Nay, of Enid, Okla., Nov. 13, a daughter.

Born—To Dr. and Mrs. A. D. Morrow, of Richmond, Mo., Oct. 27, a daughter.

Born—To Dr. and Mrs. R. M. Mitchell, of New Boston, Tex., October 25, a son.

Born—To Dr. and Mrs. J. B. Kinsinger, of Rushville, Ind., Nov. 4, a daughter.

Married—At the home of the bride, Nov. 1, Dr. Wm. Craig, of Ogdenburg, N. Y., and Miss Martha Harrington, of Kirksville.

Married—At Carnegie, Pa., Oct. 17, Dr. Noyes G. Husk of Pittsburg, Pa., and Miss Mabel Gosline. Dr. Kamp of Williamsport, was best man and Dr. E. H. Hansen, of Pittsburg, acted as usher. Dr. and Mrs. Husk are now at home in Pittsburg.

Died—At his home in Omaha, Nebr., on Nov. 5, of a complication of troubles, Dr. Gid E. Johnson.

Died—In Evansville, Ind., Nov. 16, of hepatic abscess, Dr. A. G. Moseley, of the June class of 1904.

Died—At her home in St. Cloud, Minn., on Nov. 22, of typhoid pneumonia, Mrs. Arthur E. Morgan, formerly Miss Urania Jones.

Died—At the home of her parents in McPherson, Kas., on Nov. 8, Verna Cecelia, little daughter of Dr. and Mrs. Frank Ayers.

** * * *

Removal Notices.

Dr. J. P. King from Grieve, to Fairbanks, Okla.

Dr. G. B. Wolf from Caney, Kas., to Ottawa, Kas.

Dr. Frank I. Furry from 8 and 9 Opera House Blk., to 7 to 11 Capitol Theatre Bldg., Cheyenne, Wyo.

Dr. Eugene Tiberghien from Agra to Hill City, Kas.

Dr. A. Still Craig from Iowa City, Ia., to Maryville, Mo.

Dr. J. S. Allison from Hatfield, Mo., to Monrovia, Cal.

Dr. A. M. King from Lake Arthur, to Artesia, New Mexico.

Dr. J. Clinton McFadden, from Waitsburg, to Pomeroy, Wash.

Dr. J. C. Hennan from Magnetic Springs, Ohio, to Dayton, Fla.

Dr. S. H. Heath from Oklahoma City, Okla., to Davenport, Iowa.

Dr. Adalyn Figgott from Niles, Mich., to 152 Blew St., Toronto, Ont.

Dr. Lucy Gooch from New Boston, Texas, to Evans Bldg., Denver, Colo.

Dr. A. W. McIlrnan from pocatello, Idaho, to 15 Chestnut St., Bradford, Pa.

Dr. W. H. Bowden from 1418 Locust St., Des Moines, Ia., to Franklin, Ky.

Dr. Harvey T. Lee from Rail St., to Farmer's Bank Bldg., Carlisle, Ky.

Dr. F. P. Walker from Cando, S. D., to 10 Summit Place, St. Joseph, Mo.

Dr. Ethel Hearst from Webb City, Mo., to Swisher Bldg., Salina, Kas.

Dr. Lizzie Heberger from Carrington, North Dakota, to Moomouth, Ill.

Dr. N. B. Barnes from Meridian, Texas, to 329 Pine St., Trinidad, Colo.

Dr. H. A. Stotenburg from 701 St. Helena Ave., to 1011 S. A St., Tacoma, Wash.

Dr. Arthur Kew from 117 N. Peach St., to 2212 N. 16th St., Philadelphia, Pa.

Dr. Clinton R. Lytle from Devil's Lake, N. D., to 613 North 10th St., St. Joseph, Mo.

Dr. H. A. Stotenburg from 701 St. Helena Ave., to 1011 S. A St., Tacoma, Wash.

Dr. Arthur Kew from 117 N. Peach St., to 2212 N. 16th St., Philadelphia, Pa.

Dr. Clinton R. Lytle from Devil's Lake, N. D., to 613 North 10th St., St. Joseph, Mo.

Dr. Bardin S. Brookings from 4 Woodville Terrace, Malden, Mass., to 109 Chandler St., Boston, Mass.

Dr. Mary M. Dyer from 611 Outlook Bldg., to 613 Columbus Savings Bank Bldg., Columbus, Ohio.

Dr. Harry M. Loudon has moved his main office to St. Alhans, Vt., but will still maintain a branch office at his old quarters in Enosburg Falls.

** * * *

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