

The Journal of Osteopathy

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THE JOURNAL OF OSTEOPATHY

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WHY STUDY OSTEOPATHY?

FLORENCE A. COVEY, D. O., PORTLAND, MAINE.

Osteopathy, the discovery of the nineteenth century, is the most up-to-date profession in the line of the healing arts, and this is an age in which all who are progressive and have what Dr. Still calls "an atom of horse sense," are embracing the latest and most improved vocations.

Osteopathy fulfills all the requirements of any ambitious, energetic individual. The science, although founded but thirty-one years ago, has, during this brief period, by its gratifying results, won multitudes of adherents and friends, all of whom are firmly rooted in the faith of osteopathic principles.

This is no calling for the one having "a tired feeling," but is the vocation for the wide-awake person, who, when he gets into active practice, perhaps among those who are unacquainted with osteopathy, will study the science and effect a cure of the disease through his own knowledge, which will sometimes mean strenuous exercise of the gray matter of the brain rather than a graceful reliance upon some one or more of the many adjuncts, such as vibrators, massage, electricity, and occasionally a mild drug. We are glad to welcome to our profession all zealous students who are willing to devote their life's best energies to the development of this most common sense and useful science. No others need apply.

Osteopathy, more than any other profession, develops the potential powers—those secret recesses, as it were, containing richest treasures! Our science, teaching us to appreciate everything normal and natural in man, gives us a higher and fuller appreciation of the whole kingdom of nature, the beauties of which we often fail to see, and whose striking characteristics we are apt to pass unnoticed. We are fascinated by the graceful movements of the deer, the squirrel, the oriole, the peacock and every other healthy animal whose vital organs are not compressed by the abominable chest-contracting corsets, to the extent of causing cirrhosis of the liver, appendicitis, and the other maladies produced by such wearing apparel. In a word, all the animal kingdom, man excepted, lives so naturally that disease is the rare exception and by no means the rule.

The human body, in its natural condition, is perfect in construction and the delicacy of its mechanism is striking; therefore we must not fail to impress upon the attentive laity the fact that it is the most precious treasure in their possession and that as such they should cherish it, and not be continually inflicting upon it dissipation, overwork, drugs and general neglect. This body should be made normal and kept in a perfect condition, and those most competent to adjust this anatomical structure are the world's greatest anatomists—osteopathic physicians.

Osteopaths are practically unlimited in the diseases they may treat successfully, either curing the patient or making him more comfortable. They are not obliged to face the propositions that the M. D's. have to encounter, e. g.: One of the latter said to me that he found neurasthenia, or, (as he called it) "the imaginative disease of women," impossible of cure by means of allopathic remedies. I said, "Doctor, you must treat the cause of this disease: relieve the impingement of those nerves, either as they pass from the spinal cord at the occiput, or somewhere along the spine. Free them and give them an opportunity to perform their various functions, and your imaginative disease will disappear. It is skillful, corrective treatment that is needed: namely, osteopathic manipulation, and not your poisonous drugs."

We, who are osteopaths, recognize that we are performing a grand and signal service for diseased mankind. When called to a case of acute rheumatism, spinal disease, consumption or some other serious condition which has been given up by those practicing every other method of healing, and we are enabled, through osteopathic methods, to perfect a permanent cure, then it is that we realize that in truth we are the greatest benefactors of a sick and suffering humanity. The nearest approach to anything celestial that man comes to feel while on this mortal earth, is the realization that he is doing for another what that individual is incapable of performing for himself.

Osteopathy develops the centres of accuracy and of the didactic characteristics, there being scores and scores to whom this science comes with a peculiar newness, and much concise repeating and patient teaching is required in order that these may comprehend even a small fraction of the many and great benefits to be derived from the employment of osteopathic treatment.

No more propitious age could have been chosen in which to introduce this, the most rational of all the healing arts, than the present, when superstition has virtually left us, and a science based upon practical principles appeals to the keen and receptive minds of the laity. This is a period in which many are, for the first time, becoming eager disciples of osteopathy, and our minds are stirred by many little queries, such as, "Is it definite?" Is it as a student of materia medica said: "I cannot find the bottom of it, it is all so indefinite!" No, osteopathy and its results are decidedly definite, provided one understands the bodily structure, composed, as it is, of articulating bones, with appropriate muscular attachments and convenient channels for nourishing all the physical organs.

Another query is, "Does the fascination of the student continue after he becomes a practitioner? We may answer truthfully that it does continue, and even increases to a remarkable degree, particularly, if the practitioner, in the proper application of the truths he has learned, obtains gratifying results, and is not hampered by that which is occasioned by vague uncertainty—fear.

"Fear is the enemy of good;

It is the God in man misunderstood."

Reflect for a moment upon Dr. Still's career: he delved, plodded, and even suffered humiliation and many annoyances in his efforts to develop the science of osteopathy. Could he have known fear? With all his deprivations, regardless of the world's scorn, he has given to the world the most potent of healing arts, and has paved the way for the determined student of osteopathy to achieve unlimited success if he will but bear in mind that "the rule of the artery must be absolute, universal and unobstructed, or disease will be the result."

GALL STONES.

A. B. CUNNINGHAM, D. O.

Patient, female; age thirty-three; married at eighteen; has had three children; oldest child is fifteen; arthritic history on mother's side; has always had poor health; gives history of skin eruption during childhood, also has always been constipated and has been subject to attacks of migraine. The present illness manifested itself about three years ago, and was ushered in by a very severe attack. The attacks since then have been very frequent and were as numerous as three a week. Some of the symptoms were hepatic colic, vomiting, jaundice, tenderness over the liver and pains radiating toward the right shoulder. Patient received medical treatment for years without obtaining any relief during an attack or amelioration of her condition. In order to secure freedom from pain, she resorted to the use of morphine and was fast becoming an habitue to the drug, and so osteopathic treatment was tried. Patient was treated by Dr. L. H. English, now located at Plattsburg, N. Y., during his senior term at the A. S. O., with marked benefit. The attacks diminished in frequency, the general health improved and the patient gained about fifteen pounds in weight. She came under my care about June 25th, 1905, and has been improving since.

Physical examination showed her nutrition to be fair. Examination of the thoracic cavity was negative: Liver was slightly enlarged, and there was an area of tenderness involving the right hypochondriac, right lumbar and right iliac regions. Osteopathic examination revealed the following lesions: Ninth and tenth ribs on right side depressed, ninth dorsal vertebra rotated to right, break between twelfth dorsal and first lumbar, second cervical slipped to right and general rigidity of whole spine, all of which might act as predisposing factors in production of attacks of either gall stones or migraine.

Have been able to relieve patient of pain during passage of stones by strong pressure in ninth intercostal space on both sides and, also by direct manipulation over gall bladder.

Passage of gall stones must undoubtedly be impeded by the contracture of the muscles of the ducts, some of those contractions being normal, and some being caused by the irritation exercised by the passing stone against the walls of the duct and anything which will inhibit those contractions will facilitate the passage of the stone and assuage the pain.

Dr. C. H. Hoffman, of the A. S. O., who has made a careful study of the normal contractions of the muscle fibres of the gall duct in rabbits, cats and dogs, informs me "that peristaltic waves were observed running from the liver toward the ampulla and occurring about every fifteen to twenty seconds. In addition, there were slow fluctuations in the tension of the ductus choledochus of the gall bladder. These movements can still be observed after the liver has been removed from the body, so that they are either purely muscular or due to the influence of peripheral ganglia. If the great splanchnic nerve is irritated, the bile ducts contract along their whole length and the sphincter of the ductus choledochus at the duodenum may even close entirely. If the central end of the cut splanchnic be irritated a relaxation of the bile ducts results, preceded by a strong contraction. Reflexly the innervation of the bile ducts may be influenced with the result of inhibition or excitation, and the nerves of the ducts may also be influenced by irritation of the central ends of the vagus and of the sciatic. Irritation of the mucosa of the stomach and intestine usually produces spasm of the gall bladder, sometimes also relaxation of the sphincter of the common duct. The center of these irritations is situated at the level of the first lumbar nerve in the dog, the anterior root of this nerve containing the motor branch for the musculature of the bile ducts."

The result of the treatment bears out the rationale obtained by these experiments. Besides attacks of gall stone colic the patient also suffered, after any indiscretion in diet—especially the ingestion of saccharine foods and candy—from attacks of biliousness, pain in epigastric region and slight jaundice.

Owing to lesions mentioned there was either disturbance in digestion, resulting in production of irritating substances (the fermentation of carbohydrate material is often attended by formation of lactic and other irritating acids) which either by irritating the intestinal mucosa produce, reflexly, contractions of gall-bladder, or by those abnormal products being carried to the liver and being excreted with the bile, irritate the mucosa of the duct, causing increased secretion of mucus which, in turn, causes increased viscosity of bile, thereby causing stagnation and absorption.

IMMUNITY IN ITS RELATION TO INFECTIVE DISEASES.

C. H. HOFFMAN, M. D., D. O.

At the outset it must be stated that susceptibility and immunity are relative and not absolute terms. So far as I know no animal is insusceptible to a particular disease under all circumstances. The statements that we find, therefore, that an animal or man is susceptible or immune to a certain disease does not hold good under all conditions.

Susceptibility or predisposition may be natural, acquired or inherited.

Natural Susceptibility.—This condition is said to exist only when susceptibility is great and when the animal may otherwise be regarded as normal. In the case of the mouse and anthrax, susceptibility is so great that if an animal be inoculated with anthrax at the tip of the tail and the lower portion of the tail be amputated, even within one minute, the animal will die of anthrax. The natural susceptibility of man to syphilis is also very great, excision of the seat of infection, however short a time after infection, does not protect against the disease.

Acquired Susceptibility.—Here we have to deal with individual peculiarities. A susceptibility may be acquired or a natural insusceptibility may be broken down by a variety of conditions of which the following are the chief: Bony and tissue lesions by pressing on the nerves and vessels to certain organs rendering these organs susceptible to infection or disease by the vascular or vaso-motor changes which they induce. Lesions also predispose the system to infection by modifying the function of organs concerned in elimination or in the specific secretions. Susceptibility to infective disease of all kinds is greater in youth. Hunger and thirst, improper food, exposure to heat, cold and moisture, fatigue, loss of blood, etc.

Inherited susceptibility will be discussed with inherited immunity.

Acquired Immunity.—Of this variety of immunity there are two distinct kinds, which have been distinguished as active and passive.

An active immunity may be acquired in at least five different ways. The natural susceptibility to a given infective disease may be removed after recovery from an attack of that disease. Examples of this method are very common in ordinary life.

The person who suffered from such diseases as scarlatina, smallpox, measles, mumps or whooping cough, usually never has another attack of the same disease. Here the acquired immunity is permanent, but in other cases immunity may be of shorter or even of very short duration. Thus, for a short time after recovery from an ordinary catarrh the patient is immune, but within a few weeks or months the immunity disappears. With cholera and influenza the immunity conferred by an attack of one of these diseases is so short that it may almost be said to be non-existent. Other ways are principally experimental and are: Immunity acquired by inoculation with attenuated micro-organisms. Immunity conferred by repeated inoculation with small doses of viru-

lent micro-organisms. Immunity produced by inoculation with the sterilized products of bacteria. Immunity produced by feeding an animal with toxin.

Passive Immunity.—It was observed that when an animal had obtained immunity against a given infective agent, that the blood serum of that animal, if inoculated into other animals could confer upon them also an immunity against the same infective agent. Since the second animal in this case has not been made actively immune by the specific micro-organism or its toxin, but is simply made to share in the immunity which inoculation of the specific micro-organisms or its toxin has produced in the first animal, this method of being rendered immune has been distinguished as passive. This method has been further extended by Ehrlich who showed that animals may be made actively immune against ricin (the active principle of castor oil beans) and abrin (the active principle of jequirity seeds), and that the blood serum of such immune animals is able to confer passive immunity against ricin and abrin, respectively, in other animals.

Inherited Susceptibility and Immunity.—Though much still remains to be learned concerning other forms of immunity and susceptibility, even more is unknown concerning hereditary transmission of these characteristics. But the fact, among others, that the children of tuberculous parents are very liable to suffer from tuberculosis shows the importance of the question. Now, when the child of tuberculous parents itself suffers from tuberculosis, it may either be born with evidence of the disease, in which case the tuberculosis is congenital, or the disease may not be developed till later in life. Where the disease is congenital, infection must have been derived either from the father, through the semen, or from the mother. With regard to paternal infection, though it is certain that the semen of tuberculous persons may contain tubercle bacilli, the occurrence of direct infection of the ovule is very doubtful; probably in all cases of congenital tuberculosis the mother herself has been infected first. With regard to maternal infection it is a fact that the mother may directly infect her offspring in utero with typhoid fever, with smallpox, with malaria, and in these cases the micro-organisms concerned must have passed through the walls of the maternal and foetal blood vessels in the placenta; nevertheless, it is doubtful whether such passage of micro-organisms can take place when the placenta is healthy and the mother does not have any lesion. But when the disease is contracted in later life at least two explanations are possible. Infection may take place because of the existence around the child of an atmosphere more highly charged with tubercle bacilli than normal, together with the fact that the children have anatomical bony lesions which weaken the pulmonary tissue and thereby create a favorable soil. The child may possibly inherit a susceptibility or diathesis which exists in the parents. Turning now to the subject of inherited immunity, it may be stated that newly born infants show a marked immunity to diseases to which, in later life, they become susceptible.

To explain the mechanism of immunity a great many theories have been advanced. The only ones deserving our attention are the Phagocytic Theory of Metchnikoff, the Humoral Theory and the Side-Chain Theory of Ehrlich.

The Phagocytic Theory.—This theory is bound up with the name of Metchnikoff, and was gradually evolved by him from his researches upon inflammation. Metchnikoff's special training as a zoologist has influenced his whole conception of the process of inflammation and immunity. Finding the phenomena of phagocytosis in the highest as in the lowest members of the animal kingdom and finding that the means whereby a lowly organism defends itself against an irritant—physical, mechanical, chemical, animate—consists essentially in phagocytosis, he has argued that the phagocytosis seen in higher animals when subjected to the actions of an irritant is equally a means of defense. So that according to Metchnikoff, immunity to a disease implies that the phagocytes of the infected animal are able to conquer the invading bacteria; susceptibility to a disease implies that the invading bacteria are able to conquer the phagocytes.

The Humoral Theory.—The finding of bactericidal properties in many fresh specimens of blood serum led to the theory that immunity was due to substances present in the blood in the immunised animal and recognizable in the blood serum, but not present there alone, since they existed in all the tissues and juices. These substances were considered as being formed by the cells of the body during exposure, and for a longer or shorter period after cessation of exposure of those cells to the stimulus of the specific micro-organism or its toxins. They were not formed by one specific variety of cell, but in greater or less degree all varieties of cells combined to produce them. The protective substances being present in the fluids of the body, they acted upon the bacteria or their toxins in the fluids of the body, i. e., the processes of acquired immunity were essentially extracellular. Hence, though acquired immunity ultimately depended upon the functional activity of cells, these cells did not act as phagocytes but rather as secreting organs, which according as they had been stimulated by toxins, produced specific antitoxins and antibacterial substances.

The Side-Chain Theory of Ehrlich.—Ehrlich started from the fundamental conception that the protoplasmic molecule is a complex structure like other organic chemical bodies, and consists of central radical groups of more or less complex nature attached in such a manner that these lateral groupings or side chains are capable of combining with other formed chemical bodies or of being replaced by other complexes. In organic chemistry an analogous process is generally accepted to explain the relations of isomeric compounds. Ehrlich holds that the protoplasmic molecule is capable of forming a vast number of various side-chains, and that a separate chain can be formed for every blood or cell poison which exists. The side-chains he terms receptors. These receptors are of two chief kinds: The first has a single unsatisfied combining group and fixes molecules of simpler constitution—receptor of the first

order. The second has two such groups, one the food molecule and another which fixes a ferment in the fluid medium around—receptor of the second order or amboceptor. The latter receptors come into action in the case of larger food molecules which require to be broken up by ferment action for the purpose of the cell economy. In considering the application of this idea to the facts of immunity it must be kept in view that all the substances for which anti-substances have been obtained are, like proteids, of unknown but undoubtedly very complex chemical constitution, and that in apparently every case the anti-substance enters into combination with its corresponding substance. Now when toxins are introduced or produced in the system they are fixed, like food stuffs by their haptophorous groups, to the receptors of the cell protoplasm. If they are in sufficiently large amount the toxophorous part of the toxin molecule produces that disturbance of the protoplasm which is shown by symptoms of poisoning. If, however, they are in smaller doses as in the early stages of immunisation, fixation to the protoplasm occurs in the same way, and as the combination of receptors with toxin is supposed to be of firm nature, the receptors are lost for the purpose of the cell, and the combination R. T. (receptor-toxin) is shed off into the blood. The receptors thus become replaced by new ones, and when additional toxin molecules are introduced, these new receptors are used up in the same manner as before. As a result of this repeated loss the regeneration of the receptors becomes an over-regeneration, and the receptors formed in excess appear in the free condition in the blood stream and then constitute antitoxin toxin molecules. So that these receptors which, when forming part of the cell protoplasm anchor the toxin to the cell, and thus are essential to the occurrence of toxic phenomena, in the free condition unite with the toxin and thus the toxin can no longer combine with the cells and exert a pathogenic action.

Pleones like these on immunity are well enough to study to enlarge our mental horizon but they should also impress upon our minds the fact that our duty is not comprised altogether, like that of the medical men, in identifying the germ or in the more useless task of hunting a germicide, (which the body itself can furnish) but that the afflicted individual should receive our most serious consideration. We should strive to secure the elimination of the peccant and toxic material and by correcting all lesions strengthen the cells and tissues in their fight against the destroyers. As the individual is the social and economic unit of a nation, and as the strength and resisting power of a nation depends on the health and integrity of its individuals, so the cell is the individual element of the organism and on its strength and unimpaired functional activity depends the health and possibly even the existence of the body. And this functional activity of the cell is only possible when we have correct mechanical equilibrium.

As money is the circulating medium of a nation, which enables its individuals to exchange their products, satisfy their wants and gratify their aspirations and ambitions, and as the prompt performance of these necessary functions depends upon its free and unimpaired circulation among the individuals com-

prising the nation, so the blood is the great circulating medium of the body and on the proper performance of its functions depend the health, integrity and functional activity of every cell and tissue of which the body is composed.

In a normal, healthy condition a never ending interchange is going on between the component cells of the body and the blood. If this interchange is free and unimpeded the blood constantly conveys to every cell and tissue the nutrient material necessary for their growth, the preservation of their integrity and their proper functional activity, and receives from these cells their retrograde toxic products and conveys them to the excretory organs, which, if they are in proper working order, promptly discharge them from the body.

When the truth is once thoroughly understood and appreciated that anything which interferes with functional activity of the excretory organs and prevents the free elimination of poisons, not only causes the blood to become loaded with toxic materials and thus renders it less able to take up the retrograde products of cellular activity than when it contains a comparatively small amount of these materials, but that the poisoned blood also less readily conveys the nutrient material which is absolutely necessary for the life and health of the cells, and that the accumulating poisons inhibit their activity and lessen their power to combat infectious agents and other maleficent agents, diminish their activity in the production of immunising and protective substances, when, I say, the importance of these truths is fully understood osteopathic treatment in the acute infections will be better appreciated. For on correct mechanical alignment depends the constant activity of the cells, the blood and the excretory organs and the nervous system.

MR. NOBEL AND HIS PRIZES.

These times are witnessing some exceedingly wise distributions of accumulated wealth. Perhaps the one calculated to do the most good to all nations and all conditions of humanity is that devised by Alfred Bernhard Nobel, the Swedish inventor and philanthropist.

Nobel was born in 1833 and from his father inherited an inventive turn of mind. He devoted his life to converting nitro-glycerine into a force of annihilation. In 1857 he invented dynamite and until the day of his death worked to produce an explosive that would be so death-dealing, when used in wars, as to make wars decidedly impractical or impossible. Some have urged that it was a feeling of remorse that impelled him to leave a fortune, accumulated by the sale of explosives used in wars, as prizes in fields that would have a tendency to promote peace. It is generally conceded, however, that Nobel was a real philanthropist during the years of his application to his chosen labor. He believed that the sooner war, the barbaric inheritance of nations, was made so horrible that it could not be contemplated, the sooner international peace would supervene. Thus the paradox of his life work and the provisions of his will is explained.

Nobel died a bachelor. His life was so busy and his untiring energy in his laboratory work so great that it left him no leisure for domestic pleasures. That he did not underestimate the influence and capabilities of women is shown by the great affection he ever bestowed on his mother and by the fact that at his death he left the care of his money to a lady—a resident of Stockholm.

One fact that seems quite remarkable in these troublesome times is that although he employed about one hundred thousand workmen in his factories he never had a strike, though his employees must have recognized the great strength they could have exerted in united action. He insisted on paying them well and gained the sobriquet, "Nobel by name, and noble in deed."

Mr. Nobel said to his relatives: "Do not reckon on my possessions, after my death they will not go into your pockets!" Shortly before his death he said: "I could never leave anything to a man of action. I should expose me to the temptations of ceasing to work."

The fortune left by Mr. Nobel is about ten millions and practically all that it was given by him to form a fund, the interest of which is distributed in five annual prizes. Each prize is about \$40,000 and in addition the winner is given a gold medal, bearing a portrait of Mr. Nobel, and a diploma.

The term "Nobel powder," used so frequently by scientists, will perpetuate his name for some time in scientific circles, but it is only a question of time when an even greater explosive will be invented. However, the fund he has established makes for intellectual elevation, the moral and physical well being of the human race, and has never been equalled or approached in respect of beneficence or utility. This fund will be a monument to his name through all ages and each succeeding generation will pay its tribute of honor to this worthy Swedish gentleman, who has done so much to benefit humanity.

The five annual prizes are:

1. To the person having made the most important discovery in the department of physical science.
2. To the person having made the most important discovery or having produced the greatest improvement in chemistry.
3. To the author of the most important discovery in the department of physiology or of medicine.
4. To the author having produced the most notable literary work of idealistic nature.
5. To the person having done the most, or the best, in the work of establishing the brotherhood of nations, for the suppressing or the reduction of standing armies, as well as for the propagation of peace conferences.

The will says that the inventions or discoveries of prize winners have occurred during the preceding year," but this is construed to mean the most recently brought to universal notice.

A candidate for a prize is not allowed to present his own name to the commission of awards, but it must be presented by some organized body, an educational society or a publishing company.

Mr. Nobel expressed a wish that no attention be paid to the nationality of contestants and laid stress on the fact that the invention or discovery should be of a nature to benefit mankind.

America has never been represented in the awards, not from the fact that we have no men who are entitled to recognition (for have we not, besides our great founder of osteopathy, Edison, Bell and others?) but because our educational institutions have failed to bring forward a candidate and press their claims. Recognizing this condition, THE INDEPENDENT of New York City has been progressive and patriotic enough to take hold of the work in this country. The editors of this magazine have asked for a popular vote as to who is most worthy to be presented for a Nobel prize. The voice of the people decides matters in our democratic country, and it will soon be announced to the public who the choice of the people is.

The prize of especial interest to readers of the Journal of Osteopathy is that given in the department of medicine. Mr. Nobel's own delicate health compelled him to take a keen interest in medicine, and it is quite probable that had he had the benefit of an acquaintance with the candidate we are pressing for recognition for one of his prizes, his suffering could have been relieved and his days of active usefulness much lengthened.

The awards are always announced on the anniversary of Mr. Nobel's death—December tenth. Necessary preliminaries made it impossible to give any prizes until 1901. The awards in the first four departments are made by the Royal Academy at Christina, and the peace award by the Norwegian Storting, the legislative body of a country recently on the verge of being involved in a war.

The winners of the medical prizes are: In 1901, Dr. Emil Behring, Prof. at Marburg, Germany; the discoverer of the antitoxin for diphtheria. In 1902, Major Ronald Ross, the head of the Liverpool School of Tropical Medicine, whose inquiries into the dissemination of malaria by mosquitoes made the preventive treatment possible. In 1903, Professor Finsen, of Copenhagen, discoverer of the healing properties in certain light rays. In 1904, Professor Pavloff, of the Military Academy of St. Petersburg, who made discoveries in military sanitation, the formation of urea, the functions of the liver and in regard to digestion with special reference to the control of the nervous system.

May the fifth in the realm of medicine be Dr. A. T. Still, the founder of osteopathy—he who has been of untold benefit to mankind, a quality insisted on by Mr. Nobel. He is the man who, by his unique discovery, has been able to relieve more suffering, mental and physical, than any other man the world has produced for generations. He established a sanitarium and a great school where neither pains nor expense is spared to make them great institutions for dispensing good. The school has graduated several thousand students who are scattered over the country working earnestly and ceaselessly for the success of their chosen profession and thus adding laurels to their great teacher. He has worked his way slowly to recognition and success, and it would be most fitting that in his declining years he should be crowned with this high honor, the money value of which is great, but the fame almost priceless.

DRUG FALLACIES.

(From History of Osteopathy and Twentieth Century Medical Practice).

THE CRY FOR RELIEF.

The cry going up everywhere for relief from the thralldom of drugs is heard here and there by the drug doctor; and he is forced by the impetus of public sentiment to acknowledge the mere "psychical effect" of most drugs and the "poisoning effect of many of the popular drugs and nostrums in common use." An article by J. K. P. Bowen, M. D., entitled "A Plea for the Use of Less Drugs in the Treatment of Typhoid Fever," in the Philadelphia Medical Journal for April 11, 1903, is well worth persuing. Among other good things, he says:

"Psychotherapy, or every-day practical suggestion, is an important factor in the treatment of most diseases, for aside from the psychical influence, but little of the drugs taken result in good. How frequently the physician is tempted to prescribe a medicine in treatment for his drug-believing patient for its psychical effect. * * *

"The Americans take four times the amount of drugs taken by Europeans, and our death rate is greater, especially from acute diseases. * * * How many of the peculiar symptoms, universal complications and fatal terminations are due to the treatment! * * * The statistics of the last few years show conclusively that physiological treatment with only an occasional medicinal auxiliary gives decidedly the best results. Physiological therapeutics utilizes vital forces, aids in cell growth, strengthens vital resistance, and promotes natural elimination and not the corroding, depressing and poisoning effect of many of the popular drugs and nostrums in common use. Many mild cases of most any acute disease will recover under any kind of medicinal treatment in spite of the diseased condition and the drugs, too, and occasionally, the effect of the drug is left on the system permanently, or the drug habit is acquired, which is one of the most appalling and unfortunate circumstances that could befall human form."

Drug doctors have endeavored more than once to stay the constantly increasing tendency on the part of the thoughtless to use drugs, except when prescribed by one of their own school. But the people were taught that habit by the drug doctors themselves. Drug medication is the foundation rock upon which their system is builded; hence, it will take years, perhaps generations, to undo the evils growing out of the practice. The following quotation is from the Cleveland Medical Journal, January, 1902. The same issue contained an article which every osteopath would sanction, advocating the passage of a bill requiring "the makers of patent medicines to print the true formulas of their nostrums on all labels." It also gave three pages against the osteopathic bill then pending before the legislature (Chapter IV, pages 135-6); thus trying to prevent the people from using non-drug methods and at the same time trying to compel them to patronize only those who administer drugs and incidentally only those who prescribe for a fee and require the patient, in having the pre-

scription filled, to contribute to the profits of at least two or three parties to the transaction.

THE LAMENT OF THE DRUG DOCTORS.

None are more fully aware of the passing of drugs as curative agents than some of the doctors themselves. They deplore the situation and begin to realize that they are confronted by a condition, not a theory. Occasionally, we hear the cry of despair because of the ruthless demolition of the idols of the profession by scientists in their own ranks. The following appeared in American Medicine, November 23, 1901, in an article by W. W. Van Denberg, M. D., on "Has the Use of Drugs Become Obsolete?"

"An analysis of the papers presented during the late meeting of the New York State Medical Association at the Academy of Medicine in New York, offers some interesting features in connection with one of the most representative bodies in this country. Besides the president's address, there are forty-eight papers on the program. The larger percentage of these are able documents, and fairly represent the whole. Diagnosis may be credited with eleven, or about fourteen per cent; etiology with four, or about eight per cent; mixed papers in which there may be some allusion to the use of drugs, though this is by no means certain, three papers—six per cent; special therapeutics (not drugs), one paper; idiosyncrasy, one paper; and last on the program, on the final day of the meeting, 'Brief Comments on the Materia Medica, Pharmacy, and Therapeutics of the Year Ending July 1, 1901.'

"So it seems that therapeutics, by the use of drugs, received a trifle over two per cent of the time of this meeting, and this only at the end, after interest has subsided and most of the members have gone home.

"Was this the case in the days of our fathers—in the days of Alfred Stille and his compeers?

"Do our associates, when making out the program, consider that ninety-five per cent of all the cases with which the practitioner has to deal are medical cases? Why then this pitiful less than two per cent consideration?"

The statement made before a Chicago Medical Society in January, 1904, by Dr. A. D. Bevan, that "drug treatment is useless in cases of pneumonia," might be expected to cause some surprise to the laity, but should not have aroused such a discussion in the profession as it did. Such well-known writers on medicine as Hilton, Keith, Hughes, Anders, Osler, Billings, and others had already said enough to convince the profession that drugs in such cases were useless, if not positively harmful. But the teachings of centuries are not easily set aside and the prejudices of ignorance must not be overlooked. Give drugs for their "moral effect," as suggested by doctors who protested against Dr. Bevan's statement. The following account of the controversy appeared in the press reports, and is not denied by the medical journals; but it made some of them decidedly hysterical:

"Drug treatment is useless in cases of pneumonia. The medical profession, so far as medicines are concerned, can be of no assistance in the fight

against this disease. The sooner the profession will acknowledge this to the public and set to work to discover some specific to save pneumonia patients, the better for all concerned.'

"This startling statement by Dr. Arthur D. Bevan, who stands high in the profession, has stirred up the members of the Chicago Medical Society at their meeting.

"Several physicians sprang to their feet to protest against this arraignment. All had to admit, however, that there is no definite remedy known, and they based their protests solely on the contention that they might influence the patient favorably by easing him somewhat and by the moral effect of their presence."

The Osteopathic Physician, February, 1904, contained the following caustic comment upon the above incident:

"So they go on admitting that the 5,000 drugs already listed in the United States Dispensary are of no service in this and that ill, while they are a positive harm in some other one, but still multiplying trouble by inventing new drugs, led on by the ignis fatuus that some day inert matter will be found in cunning formulæ which will solve the mystery of creative life and actually impart vitality to vitiated protoplasm.

"Alas, vain search! Alas, futile alchemy—worse than the attempts at transmutation of lead to gold in the olden time! Worse than the search for a Fountain of Immortal Youth—because not alchemists, not romanticists, not poets, not devotees of superstition, but men of science engage in this child-like bootless task! * * *

"We feel sorry for our benighted brethren of regular medicine. It may be a bit Pharisaical to admit it, but we can't help it. They seem to us to be fetich-worshippers, pure and simple, in this blind searching for panaceas of life's myriad ills. Knowing as much as they do of all the co-ordinate branches of a liberal scientific education, it seems inexplicable to us that they should make such poor use of their knowledge and talents. Truly, it is not what men know, but how they use it, that counts in medicine."

GROPING IN THE DARK.

It has been only a few months since the X-ray and radium were heralded as sure cures for cancer. The present writer said then to a very sick patient that she would live to see those medical fads things of the past, just as scores of others that had been relegated to the therapeutic waste-basket are now known only to history. The prediction is already verified according to expert witnesses. P. J. M. McCourt, M. D., in an article in the Medical Review of Reviews, April, 1904, makes the following statement:

"Aside from operative procedures, the only assumed remedies for carcinoma at present are the 'X-rays' and the radium rays. It is laudable that these and all available agents should be studied and subjected to crucial—not commercial—tests; but it is noxious that we should be deluded by the extravagant claims of undignified enthusiasts of 'cures' which are wholly chimerical.

I would not depreciate the rational work of others; we are—or should be—seekers for the truth in our own way. But the only therapeutic result thus far produced by the Roentgen and radium rays has been the occasional temporary suppression of epithelioma, soon to be followed by local recurrence, metastasis, or general diffusion throughout the system. And in view of the apparent causation of carcinoma, no other results could have been anticipated. The unknown has a fascination for many, sometimes even for logicians; and of these rays we as yet know practically nothing—except their dangers."

But the author has his own method of treating this loathsome disease, which may have biased his mind against other methods. The injection of blood serum from a diseased horse as an antidote for diphtheria, and the pus from the sores on a diseased cow for small-pox, is refinement compared with the dosing of the cancer toxins prepared as described below. Note the results. Only fourteen per cent, "apparently restored to their former condition of health." The results upon the whole do not appear to be as successful as the do-nothing method. A. F. Jones, M. D., in the Journal of the American Medical Association, May 9, 1903, after giving four cases, says: "In two of our cases the neoplasm disappeared spontaneously, the disappearance depending, no doubt, on some form of katabolism not yet understood." Katabolism is the tearing down act in the process of nutrition, and is quite well understood. Are we to infer that Dr. Jones believes in a special "form" of katabolism for each disease? Here is Dr. McCourt's method and its results:

"The cancer-tissue is pressed and triturated in purest vegetable glycerine, and the juices thus obtained are separated until micro-organisms are no longer found. The resultant fluid contains all the ptomaines or alkaloids of the cancer virus, as well as those of other materiæ morbose—syphilis, scrofula, tuberculosis, erysipelas, malaria, etc.—associated with them in the subject from whom the virus was collected. * * *

"In five per cent—the advanced and extremely malignant—the toxins were found to be entirely valueless. In ninety per cent, relief from pain, fœtor, hemorrhage, insomnia, vesical and rectal tenesmus, etc., has been marked and life materially prolonged. And in fourteen per cent, indurated glands have become normal, ulcers have healed, body weight has increased, a complete cessation of all objective and subjective symptoms has ensued, and the patients are, apparently restored to their former condition of health.

"Whether this relief is permanent can be answered only by time. Even hope must be in abeyance until years of attentive and anxious observation have passed. Meantime, I have not told the whole truth on behalf of the cancer toxins."

THE SERUM FALLACY.

The serum method seems to be the most natural successor to the drug method of treating diseases. Many of the drugs used in common practice are obtained from diseases of plants or animals. Serums are always secured from animals diseased artificially. The animal is inoculated with the desired dis-

ease, as diphtheria, tuberculosis, or tetanus, and the serum of the blood which contains the antitoxin to the products of the disease germs with which the animal was inoculated is prepared for the market. Only a few years ago it was hailed as the open sesame for the cure of all germ diseases. Many kinds of serums have been prepared, and still the profession is at work along that line. The serum for tuberculosis has proven to be an absolute failure, and the profession has even lost faith in its use for diagnostic purposes. That tetanus (lockjaw) has been increased by the use of the serum is now quite generally conceded. But the profession as a whole still claims that the serum treatment is the only one for diphtheria and it is little less than suicide for a drug doctor to express doubts as to its success. For the laity or an "irregular" to question the correctness of the statistics that show the positive benefits to be derived from the serum treatment of diphtheria is to have his honesty or sanity questioned; and the look of contempt, or even scorn, with which he is met, is apt to make him wonder whether truth is truth or falsehood. Occasionally old school medical authorities will speak the truth as they see it, even though all their professional brethren seem to be against them. An article by Boucher, entitled "Extraordinary Gravity of Diphtheria since the Introduction of the Behring and the Roux Serums," appeared in the *Journal de Medicine de Paris* April 3, 1904. A translation by Dr. T. C. Minor, a regular, is found in the *Electric Medical Journal*, June, 1904. Statistics to prove the fatal results due to the administration of antitoxin for diphtheria are given: The following quotations contain the pith of the article:

"Every day, in the great public press, editors as ignorant as Pasteur of the great principles of our science, proclaim with conviction that hydrophobia is vanquished by the divine and immortal chemist, and that diphtheria has been conquered by Disciple Roux. For hydrophobia it is now well known, well demonstrated, and positively proved that fatal cases have doubled since Pasteur's invention. Then, too, we have statistics, coming from all sides, that the mortality from diphtheria has also increased since the introduction of Behring serums, recopied by the eminent Roux.

"The study of the mortality of Basle leads one to the same conclusion. In fact, according to the works of Lotz that appeared in *Correspondenz Blatt fur Setweizer Artz*, 1898, it is shown that in the ten years between 1885 and 1894—that is to say, before the serotherapeutic epoch—an annual mortality of 29 cases is noted; and in the years that follow the mortality was raised to 45, and even reached 69. Let it be understood meantime that there are always periods of lowering in morbidity and mortality from all causes. It would be illogical to assume that temporary periods of lower mortality were due to serum.

"Such are the indisputable facts observed in more than fifty thousand cases. Meantime many medical confreres who might be considered as good practitioners and even as clinical observers, claim that their patients have been aided by serums with truly excellent results.

"How explain this medical mirage, and make these propositions appear-

ing antinomical, agree? To my mind it is a very simple matter. To make false membranes disappear, which, for all the world represent a material expression, one of the disease—these false membranes that choke the patient, and by suppuration give the malady its very frightful character—such is the pursuit and attempt of the physician. For, if the false membrane is made to disappear, hope for the recovery of the patient is reborn, and the dawn of the cure appears. If, later on, complications follow, if the kidneys, bronchi, lungs, or heart are attacked, if death terminates the sad scene, the practitioner himself is put beyond blame by the family, for did he not cause the visible signs of the malady to disappear before the patient's death? was the suppuration not stopped? Yes, he did his best. Now the inoculation of anti-diphtheritic serum makes the false membrane fall off rapidly, not because of any specificity it is supposed to contain, but purley through mechanical action. We know that artificial blood serum will produce the same results. For the augmentation of sanguinary pressure, caused by the ingestion into the vascular system of a certain quantity of a liquid, is certain to reach the point of inflammation; that is to say, the spot where the inflammation is most considerable; a serous transudation occurs that permits the false membrane to become easily detached. I imagine that this hyperpressure can not occur without exercising a profound repercussion on the heart, even up to the point of inducing cardiac collapse. Sommers' observations leave no doubt on this point. On the other hand, if I report the account rendered by the works presented to the Congress of Nancy by learned bacteriologists, these indicate that the inoculation of serum is often followed by albuminuria and that nerve trouble is the result, expressed at times by attacks of auria or nephritic hemorrhage. I have thus the right to conclude that the inoculation of anti-diphtheric serum gives a natural explanation of diphtheria attacking the heart or kidneys, being the direct cause of these complications. * * *

"All my confreres who have observed the progress usual to this affection agree with me, I am sure, that these rapid deaths, absolutely abnormal, were occasioned by complications induced by the serum. I make this remark in order to answer a young official, chief of a clinic, who assured me in a patronizing manner, that serum never induces accidents. In reality the Roux serum never exercised any beneficial action on diphtheria; and if a number of sincere practitioners affirm its efficacy, it is because they have been misled by the fad of the moment, and forgot the true proportion of deaths from diphtheria before the era of Pasteur, and besides have considered simple cases of angina diphtheria, simply because they showed a bacillus, so they used the serum as a cure, when the same cases would have recovered with any simple treatment.

"Are we then wise in concluding, once and for all, that Roux's serum is absolutely murderous and a danger to the public health? So why, under the pretext of spreading confidence, giving convolutions, and boasting, like some editors of the public press, will thinking men indorse a remedy that not only poisons but kills."

Elmer Lee, M. D., New York, commented on the above article from the French journal in the following language, as printed in the New York Tribune in the summer of 1904.

"The claims that are seductively held out that cases treated early by antitoxin would recover, have utterly failed. The claim subsequently that cases treated by antitoxin recover more quickly than those not so treated has utterly failed to be true. The claim that the death rate would be lessened has proved to be a disappointment. The claim that antitoxin was harmless has been proved to the contrary by many fatal terminations. It is not the purpose to impute insincerity or lack of intelligent experimenting on the part of the profession concerned in experimenting with antitoxin, but the promises of better results through its use have unfortunately failed to be substantiated. The human system, when laboring under morbid influences, needs rather those elements which can add strength and vigor to the vital resistance.

"The records of the cases treated in the Willard Parker Hospital of New York City, prove that antitoxin is dangerous and even fatal. The statistics of that hospital establish that the further use of antitoxin is unjustifiable. Dr. Joseph E. Winters, of New York, has sought diligently to establish the value of antitoxin, but the clinical experiences have forced him, unwillingly, to condemn its use. Professor Lennox Brone, of London, patiently and earnestly sought for clinical reasons, to further the interests of antitoxin. His conclusions are emphatic and pronounced against it. Dr. Welch, of Philadelphia, also deprecates the use of antitoxin in the Municipal Hospital of that city."

The testimony of another eminent authority is cited to the same effect. This is from The Medical Brief, April, 1905. It is published in St. Louis, where thirteen children were killed by antitoxin within a month in 1902:

"Suppose you stop and think about this serum question a moment.

"If you should take the serum of a dead man, which, as you know, is highly poisonous, and add enough carbolic acid or trikresol to make it absolutely inert, it would be safe for you to inject it into a living man. If, now, this man were suffering from a disease, and good results followed the injection, would you not ascribe the improvement to the antiseptic rather than to the inert serum? How can it be the serum, when that has been killed, its identity destroyed, by the action of the antiseptic?

"This is precisely the condition antitoxin is in to-day, and in spite of the money invested in its manufacture, and the various interests tied up in it, the serum idea is on the decline, and no power on earth can stop its passing out of use in the course of years."

HARM IN DRUGGING.

Physicians can not deny that their prescriptions are often neither more nor less than the preparations sold in the form of patent medicines. Druggists will tell you that compounds sold as patent medicines are often dispensed upon the prescription plan. The medicine is, of course, removed from the original package and the label is not allowed to reveal its identity. It is truly unfortu-

nate that such things are done, and doubly unfortunate for many poor victims of disease that they know that such things are done. They find they can get something of the druggist that seems to do them the same good for much less trouble and money than if they would go to the doctor. Most of them think that if "a little does good more will do more good," and they thus drift almost imperceptibly into the drug habit. Doctors sometimes give the warning, but often it is too late. The warning may not reach the victim, and if it does, the belief that mercenary motives may have been the impelling force that caused the warning, prevents its being heeded. Concerning the abuse of "our so-called tonic medicines," an editorial in the International Medical Magazine, December, 1902, said:

"But there is a growing tendency on the part of the laity to abuse greatly remedies of this class, and, for this tendency it is to be feared that we physicians are largely to blame. It is so customary with us whenever a patient comes complaining of debility, to prescribe strychnine, quinine, or some other bitter stimulating medicine for the avowed purpose of toning up the system, that the patients naturally infer that whenever one is weak a tonic is the proper remedy, and as the quack medicine men are thrusting continually upon the public great quantities of compounds labeled 'tonic,' it is quite natural that these should frequently be purchased directly from the venders without first seeking the advice of a physician.

"A vast amount of harm is certainly done by this extensive and indiscriminate consumption of stimulating drugs, whether self-prescribed or prescribed by those physicians who do not take the trouble to ascertain the cause of the alleged debility. In many cases the latter is due to organic or serious functional disease in some organ of the body, which is aggravated instead of being benefited by the tonic. Bright's disease, diabetes, tuberculosis, syphilis, and certain of the numerous diseases of the gastro-intestinal tract are among the many maladies which produce debility, and, with the possible exception of tuberculosis and the more atonic forms of indigestion, none of these are likely to be benefited, to any considerable extent, by purely tonic or stimulating remedies."

The increased prevalence and fatality of pneumonia, kidney troubles, cancers, and nervous and mental disorders are unquestioned facts. The almost universal use of alcohol, opiates, and other narcotic drugs by drug doctors, and the widespread use of these poisons, including tobacco, furnish us with a clue as to the lines along which we must work if we would check the frightful pace with which some diseases are carrying their thousands to untimely graves. The late N. S. Davis, M. D., had this to say on that subject in International Clinics, Volume I, Fourteenth Series, 1904:

"There are no articles of food in general use that are supposed to increase the susceptibility to attacks of pneumonia.

"The same, however, can not be said in regard to certain drinks and narcotic drugs that are extensively used in all the countries of Christendom. Of

to determine. I only give you a glimpse of this, that you may remember that we all have a part in this work. If our Association is a success it is because someone has been busy—Did you help?

I am proud of our Association. The M. O. A. should be the largest and most enthusiastic state association in existence. Why not? We have the numbers, material, and advantage—the advantage of including the fountain heads of our science. We have a right to be proud of our Association and to guard it with jealous care. But, we must not allow personal interest to take the place of our united professional interests.

In looking back over my six years' of work with the Association, I believe herein lies the cause of the seeming neglect of quite a few of Missouri's practitioners:

"Personal interest," and "Let the other fellow do the work." I believe this diagnosis is correct—will some other doctor take the case and treat it? If he succeeds in curing the disease (?) his name should be called blessed. Your State Editor and other officers would hold a love feast then lead you on to victory, I am sure.

Every practitioner in Missouri should be a working member of his State Association. You need us—we need you. But remember "we cannot use bullets made out of soap bubbles." When the M. O. A. shoots it always leaves its mark.

Thanking you for your attention I leave this for your consideration and disposition.

DR. MINNIE POTTER,
State Editor M. O. A.

Christyern Science.

MINNIE MACARTHUR LAING.

My ma's a christyern scierntist, she haint no use atall,

Fer any other kind ov christyerns, be they big er small.

She sez that pain is errer and there's nothin' real but joy

And she is only sperrit and I'm sperrit's little boy.

And she gits off a lot ov talk that sometimes makes me sick

"Deny it." That's just what she sez, I do and I get licked.

Ma does some awful funny stunts when we get next a pain,

Then she "denys" an' "demernstrates" and "holds thorts" with her brain;

Fer preachers ner fer doctors she aint got no use atall,

Fer she's got wise that they all tell lies and only God is all.

But I dunno, if pain aint real, what I git wolloped for,

And why she's allus got poor Pa a-lookin' fer my gore,

She can't see blood when folks gits hurt, but it just takes one glance

And she gets wise when I've got dirt an grease upon my pants.

Ma sez you don't see what you see, ner don't feel what you feel,

She sez its plain es it can be that nothin's reely real.

But she charged me fer the dish I broke, an' made me earn the cash,

Now, how, if matter isn't real, could ma hear that dish smash?

Ma she puts up an awful bluff, an' Pa don't answer back,

She's simply down on everything, she gives 'em all a whack;

I had some ice right in my hand, an' down her back it fell,

If ma's a sperrit, Hully Gee! Some sperrits they can yell!

There's some things I would like to ask, but 'taint no use to care,

If I'm just sperrits little boy that don't live annywhere,

If I am just my parents' thort, if I aint here atall,

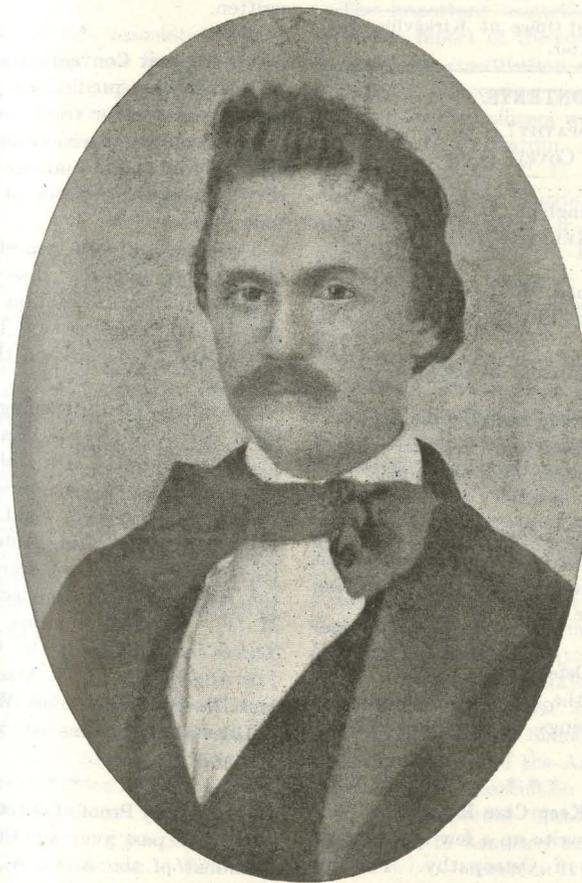
How does Ma know just where to spank when only God is all?

I've found out one thing for myself, what- ever spiel she gives,

It hurts a sperrit just as hard to hit him where he lives,

This bein' sperrits little boy I can't see thro' one bit,

Why, if there's nothin' real but joy, there's blisters where I sit!



DR. A. T. STILL.

(From a daguerreotype taken in the 50's.)

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To Those Who Intend Entering the A. S. O.
The freshmen classes begin September 18th.
All other classes began September 4th.

* * *

Research Laboratories.

Attention is called to the announcement of Drs. Hoffman and Still in the advertising pages of this issue.

* * *

Osteopaths.

The editor of the Journal will appreciate information, clippings or anything relating to osteopathy.

* * *

Do You Keep Case Reports?

If so, why not write up a few typical cases for the Journal of Osteopathy. You are always glad to read what your fellow practitioner has to say about a case and he is equally desirous of reading about your cases.

* * *

Clinic Patients.

With the re-opening of school at the A. S. O. the clinic department is prepared to take charge of a large number of patients free of charge. Practitioners in the field are requested to send worthy patients, who are unable to pay for treatments, to our clinic.

New History of Osteopathy.

The editor has recently received the New History of Osteopathy, a lengthy extract from which appears in this issue of the Journal. The book is a handsome one and is most interesting reading from cover to cover.

Dr. Booth is to be congratulated on the production of a history so complete and well written.

* * *

A Great Convention at Denver.

Despite the predictions that the great distance of Denver from the large majority of the osteopathic practitioners would militate against the attendance, over three hundred signed the register at the convention hall.

The meeting was peaceful and cordial. There were but few dissensions. All the business of the Association showed signs of growth and prosperity. The membership passed the 1000 mark on the second day of meeting.

The officers for the ensuing year are: President, Dr. A. L. Evans, Chattanooga, Tenn.; first vice-president, Dr. John T. Bass, Denver, Colo.; second vice-president, Dr. Lena Creswell, San Diego, Calif.; secretary, Dr. Harry Linden Chiles, Auburn, New York (re-elected). Assistant secretary, C. A. Upton, St. Paul, Minn. (re-elected). Treasurer, M. F. Hulett, Columbus, O. (re-elected). Three-Year Trustees: Dr. Cora B. Tasker, Los Angeles; Dr. C. B. Atzen, Omaha, Neb., and Dr. T. L. Ray, Fort Worth, Texas.

Dr. Evans remains editor of the Journal of the A. O. A.

* * *

Laboratory Proof of Osteopathic Theory.

For the past year Dr. Carl P. McConnell, president of the A. O. A., assisted by Dr. F. C. Farmer, has been conducting experiments designed to prove that the "osteopathic lesion" is the cause of disease.

The results of the investigations were given in the president's address to the A. O. A. at their meeting in Denver.

To state it briefly, Dr. McConnell produced artificial rib and spinal lesions in healthy young dogs—the force used not being sufficient to interfere directly with the spinal cord.

In each case as Dr. McConnell said, "They

were soon very sick dogs."

Analysis of stomach contents showed pathological changes in a very short time and post mortem examination, areas of denervation in the stomach, and in the spinal cord were to be seen small ecchymotic spots. In one case there showed a decided inflammation of the nerve trunk along the seat of the lesion.

Dr. McConnell and his associate deserve much credit for taking the first great step in this line of research, and while it is too soon to crow over the results of this work (Dr. McConnell would discourage any hasty conclusion) the outlook for laboratory proof of osteopathic theory is very bright.

* * *

Dr. A. T. Still is in receipt of a letter from Secretary Ericson of the Boston Osteopathic Society in which he says: "Our Society was founded with the aim and object of studying along strictly osteopathic lines and for the development of the fundamental principles of the science discovered by you." The letter then calls the Doctor's attention to article 4 of section 4 of their constitution which, he says, was unanimously and enthusiastically adopted. The article follows: "Dr. Andrew Taylor Still, the discoverer of Osteopathy, is hereby made an honorary member of this Society, and no others shall be elected during his lifetime."

* * *

FOR SALE.—\$250.00 cash takes my furnished office and practice. Tables and library reserved. Will guarantee between \$200 and \$300 cash practice at time of sale, and that the practice has run from \$200 to \$500 per month for over four years. Illinois city of 15,000. No opposition. Will keep purchaser with me until he can handle the practice. Address "Sigma," care Journal of Osteopathy.

* * *

Murray Promotion Service.

A trial month of our promotion service to assist you in quickly securing new patients, and our book "The Successful Promotion of Osteopathy," will be sent for five dollars. The book alone will be sent for one dollar until Oct. 15, former price two dollars. Dr. Chas. H. Murray, Elgin, Ill.

A. S. O. Alumni Meeting.

The Alumni Association of the American School of Osteopathy held its annual meeting in the Brown Palace Hotel, Denver, Colo., Aug. 15, 1905.

The meeting was largely attended and was called to order by the vice-president, Dr. N. A. Bolles of Denver.

The important matters for consideration were the report of the committee appointed to revise the constitution, and the election of officers for the ensuing year.

The following officers were elected: President, Dr. M. C. Hardin, Atlanta, Ga.; first vice-president, Dr. C. C. Cornelius; second vice-president, Dr. Carrie A. Gilman, Honolulu H. I.; secretary, Dr. E. C. Link, Kirksville, Mo.; treasurer, Dr. Bertha Buddecke, St. Louis, Mo. Trustees: Dr. H. E. Bailey, St. Louis; Dr. J. L. Holloway, Dallas, Tex.; Dr. Almeda Goodspeed, Chicago; president and secretary ex-officio members.

Dr. F. E. Moore of La Grande, Ore., presented the report of the committee appointed to revise the constitution. With a few additions and slight changes the constitution as follows was adopted: Constitution of the Alumni Association of the American School of Osteopathy, Kirksville, Mo.

ARTICLE I.—NAME.

Section 1. The name of this Association shall be the Alumni Association of the American School of Osteopathy.

ARTICLE II.—MEMBERSHIP.

Sec. 1. All graduates holding diplomas from the American School of Osteopathy shall be members of the Association.

Sec. 2. This Association elects our honored and respected founder, Dr. Andrew Taylor Still to honorary membership.

ARTICLE III.

Sec. 1. The officers of this Association shall be, president, two vice-presidents, a secretary, a treasurer and a board of trustees.

Sec. 2. The board of trustees shall consist of five (5) members, two of whom shall be the president and the secretary of the association. The trustees shall arrange for all meetings, audit the accounts of the treasurer and at the annual meeting make a report of the condition of the association.

Any vacancy in any office in the associa-

tion may be filled by the board of trustees until the next regular meeting of the association.

Sec. 3. The officers and trustees shall be nominated by the association at its regular meeting and shall be elected by ballot.

Sec. 4. The treasurer shall hold the funds of the association subject to the order of the association or board of trustees, signed by the president and secretary of the association.

Sec. 5. All other officers of the association shall perform the duties usually devolving on such officers.

ARTICLE IV.—MEETINGS.

Sec. 1. The regular meeting of the association shall be held annually, the time and place to be determined by the board of trustees and notice of such meeting shall be made at least sixty days before the time of meeting and the fiscal year shall coincide with that of the American Osteopathic Association.

Sec. 2. Special meetings may be called at any time by a majority of the board of trustees.

Sec. 3. Fifteen (15) members of the association shall constitute a quorum.

ARTICLE V.

Sec. 1. This constitution may be amended at any regular meeting by a two-thirds vote of the members present and voting and all other affairs shall be governed by Robert's Rules of Order.

ARTICLE VI.—DUES.

Sec. 1. The expenses of the association shall be provided for by the board of trustees by a levy upon the membership.

E. C. LINK, Secretary.

* * *

Make the New Year Book Accurate.

Having been entrusted by the trustees of the A. O. A. at the Denver meeting with the arduous task of preparing a year book that will contain an official directory of all legitimate osteopaths in practice, I herewith urge the presidents and secretaries of all state osteopathic societies to lend me their prompt co-operation.

It is the universal wish of the profession that the next osteopathic directory printed will be accurate, up-to-date and complete. I am ready to make it so if I can enlist the

help needed, both to revise the present lists and read the proofs I will submit in due season. Not only are the officials of state and local osteopathic societies urged to give their aid, but all public-spirited osteopaths who are willing to lend a helping hand. Is the list of your city and state correct as far as you know the facts?

Please make a note of all errors of omission and commission in the year book of 1905 and send the same to me promptly. If you see any name incorrectly spelled, initials wrong or address faulty, please send the correction to me, stating the number of the printed page of the 1905 year book on which the error is found. If your name is omitted or that of any other legitimate osteopath, also notify me, giving school, year and present address.

The osteopathic profession has never yet produced a complete, authoritative and satisfactory directory. It is sorely needed. I pledge the profession to spare no time or toil to furnish it by January, 1906, if I may have the assistance of those whose help I have a right to expect.

Faithfully and fraternally,

HENRY STANHOPE BUNTING, D. O., Editor.

* * *

There has been much discussion in Rothville and vicinity of late over the recovery of P. T. Jackson, a prominent farmer, living just north of there, being cured of appendicitis by Willis Stuver, the osteopath, of Brookfield. The patient was given up by Dr. Buck, of Rothville, saying he could do nothing more for him, and advised the family to call in other physicians. They expressed a desire for an osteopath. Accordingly, Dr. Deeming was telephoned to come at once. He was out making calls, but Mr. Stuver, in his senior year to graduate, finally went to the home of the man who was in such agony. Advice was given over the phone to Mr. Stuver by Dr. Deeming. The farmer, a man about 38 years of age, was in Brookfield this week. Said he thought his time had come. The pastor and relatives had been called in. The saving of the man's life after such intense inflammation had set in seems almost incredible. But it is a fact. This is simply a news item and in no way an advertisement.—Brookfield Argus.

DEFT TOUCH AWAKENS A PARALYTIC FROM TRANCE.

Expert Removes Blood Clot from Brain Without Knife.

By the process of manual manipulation known as osteopathy, James Fagan, a building contractor of Hastings-on-the-Hudson, is reported to have been relieved of a clot on the brain, and returned to almost normal mental condition, after lying in a deathlike trance for three weeks. The restoration—if it becomes complete—will be in direct defiance of all the accepted laws in therapeutics relating to cranial injuries.

Fagan is 35 years old. He lives on Washington avenue, Hastings, in a house built and owned by himself. His father, mother and his sister, Mrs. Elizabeth Manogue, and Mrs. Manogue, Sr., live with him, and all unite in ascribing to the osteopathic treatment his recovery from an injury to the brain which the surgeons of Dobbs Ferry Hospital said demanded a surgical operation.

The contractor was engaged about a year ago in building a stairway, when the supports gave way and a heavy mass of wood crashed down on his head. He did not experience any ill effects immediately and continued at business every day until last June, when one day he suddenly swooned, and was taken in an unconscious condition to the hospital in Dobbs Ferry, where the surgeons said he was suffering from a brain clot.

Mr. Fagan fell into a comatose state and could not be aroused. The involuntary functions of the body were not interrupted, and he was able to take and assimilate nourishment, but his brain was to all intents and purposes inert and dead. There was no doubt as to the correctness of the diagnosis. It was verified beyond question by eminent surgeons, and the relatives were advised strongly to have the skull trephined and the clot removed, as the only hope of saving the patient's life or restoring him to mental health, but the parents refused.

They consulted a New York osteopath, who said he would be able to dissipate the brain clot without the use of instruments, and the family, after consultation, decided to permit him to make the trial. He went to Hastings, where the patient was in his

own home, having been removed from the hospital. His jaws were locked and the lower part of his body was paralyzed. The food he took was introduced into his stomach through a tube.

The operator agreed, after an examination, that there was a brain clot, and at once began the massage treatment by manipulating the arteries that supplied the brain with blood. After the fourth treatment Fagan came out of the trance and was able to speak and recognize persons around him. His jaws were unlocked, and the paralysis gradually disappeared.

The only abnormal condition he presented was a form of aphasia. He was unable to frame words or sentences to express his thoughts or desires, and miscalled the names of familiar objects. This condition disappeared slowly, and yesterday he was apparently far on the way to recovery.

"My brother," said Mrs. Manogue, "has full control of his limbs and his faculties. There is not even a trace of the paralysis that affected his left arm and leg and his face. The injury was so treated that the clot was absorbed and drained off through the natural channels. The knock on the head a year ago had produced an unnatural condition in the neck and blood vessels of the brain and the clot was formed. Now it has been absorbed without the use of the knife and we are indeed thankful."—N. Y. Press.

This case was treated by Dr. S. C. Matthews 500, Fifth Ave., New York. The editor has mixed up the word massage in describing the case.

* * *

History of Osteopathy and Twentieth Century Medical Practice.

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More Paternalism.

If the American Medical Association has its way we shall have a Secretary of Health, with a seat in the Cabinet, as one result of a "universal health bill" which is to be introduced at the next session of the Congress. Among the things which would fall within the jurisdiction of the department would be all questions "touching on and appertaining to" pure food, pure drugs, supervision of quarantine and also the very serious and difficult problem of love, courtship and marriage.

One of the leaders in the movement is Dr. A. J. Barchfield, of Pittsburg, Pa., who had this to say on the subject of national interference: "I believe the health of the people of this nation is as essential to their welfare as the army or navy. The last Congress appropriated \$200,000,000 for the army and navy, and practically nothing for the protection of lives and health. To further this object I believe a new Cabinet portfolio should be created. I believe that epidemic, endemic and zymotic diseases should be eliminated from the category of American fatalities. We are rich enough and powerful enough to handle this problem as successfully as other problems. I believe the health problem should be under national supervision, and not allow in any State any conflict between townships, boroughs or cities, nor would I allow State lines to interfere with the perfect and scientific eradication of endemic diseases which can be successfully avoided by proper, natural intervention."

We quoted some time ago a remark made by Dr. Jonathan Wright, of this city, in the New York Medical Journal, in which he hinted that it might be the fate of our civilization to drift into that state of intolerable supervision and minute regulation of daily life which distinguished the ancient Egyptians and Peruvians.

If the National Government were to take over the control of everything pertaining to the public health, the Secretary who administered the office immediately concerned would have powers second to no other member of the Cabinet. For example, the regulations of the various States differ on the subject of the qualifications for the prac-

tise of medicine. The Secretary would have to decide on a uniform test. As a final judge on the subject of fitness for matrimony he would make M. Pobiedonostseff, the Procurator of the Czar's Holy Synod, look like thirty cents in the matter of authority.

A bishop once said that he would rather see his country free than his country sober. In the same way it is better for us to be free and less healthy than we might be, than more healthy than we are and less free than we ought to be.—Ex.

* * *

A Mistaken Diagnosis.

(From the Indiana Medical Record.)

The following conversation recently took place in India:

Physician (with his ear to patient's breast): There is a curious swelling over the region of your heart, sir, which must be relieved at once.

Patient (anxiously)—That "swelling" is my pocketbook, doctor. Please don't reduce it too much.

* * *

The Peril of the Physician.

He was a doctor witness in an Irish murder case, and was very anxious that the Crown should let him go home as soon as possible. So he got a friend of his to plead in his favor. This was how the friend did it:

"It is this way, Attorney-General. My friend, the doctor, has been for three years looking after two old ladies. If you don't let him go home to-morrow he's afraid the ladies will get well."

And that's why the doctor doesn't speak to his friend.—Sporting Times.

* * *

"The advantage of the medical profession is that the dead are distinguished by wonderful charity and discretion; we never hear them complain of the physic that has killed them."

* * *

Every One Should Read Confessions Of An
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A postal card will bring descriptive circular. Address, Dr. E. D. Barber, 405 Hall Bldg., Kansas City, Mo.

Personal Mention.

Dr. and Mrs. Bandel of Brooklyn, N. Y. are spending their vacation in Europe.

Dr. and Mrs. Louis Brenz, of Arkansas City, Kans., were visitors at the A. S. O. during August.

Dr. Wm. H. Richardson has located at 18 St. Austin's Place, Livingston, Borough of Richmond, New York City.

Dr. Wm. S. Nicholl announces that he has opened an office at 1337 North 13th St., Philadelphia, Pa.

Dr. W. M. Hatfield has purchased the practice of Dr. B. Reesman at Moscow, Idaho.

Dr. M. G. E. Bennett has purchased the practice of Dr. H. E. Penland at Eugene Ore. Dr. Penland will come to Kirksville for a post-graduate course.

We have just learned that Dr. Fannie Springmire was married January 29, 1905, to O. H. Parks of Macon, Mo., in which place they reside.

Dr. Annie M. C. Brownlee has recently gone to Patterson, N. J., where she will engage in practice with Dr. R. T. Dowell at 719 East 25th St.

Mrs. Josie E. Gregory, D. O., of 518 W Oak St., Louisville, Ky., has formed a partnership with Dr. J. E. Oldham at Hopkinsville, Ky.

Cards are out announcing the marriage, on the 14th inst., of Dr. Geo. W. Reid and Dr. Eva Mae Greene, both of Worcester, Mass.

Dr. Josephine A. Trabue announces that she has opened an office for the practice of osteopathy in the Syndicate Bldg., Pittsburg, Kans.

Drs. F. H. Glenn and C. L. Fagan have formed a partnership and will practice in Stuttgart, Ark., where the former has been located for more than a year.

Drs. Morris and Norman of Memphis, Tenn., have dissolved partnership Dr. Norman continuing the practice. Dr. Morris and Mrs. Morris are now located at St. Catherine, Mo.

Drs. Lynd & Lynd announce having

moved into more commodious offices in Houston, Texas. They may now be found at 430-434 Commercial National Bank Building.

Dr. Clara C. T. Wernicke and Dr. Orella Locke have dissolved partnership. The former will remain in the offices at 55 Hadden Hall, Avondale, Cincinnati, Ohio, and the latter is located at 11 Cumberland Bldg., Avondale, Cincinnati, Ohio.

The following alumni visited the A. S. O. during the past month: Dr. and Mrs. T. E. Morris, St. Catherine, Mo.; Drs. W. J. Banning, Buffalo, N. Y.; Burthal Reesman, Moscow, Idaho; W. F. Link, Knoxville, Tenn.; C. W. Proctor, Buffalo, N. Y.; Geo. Fout, Richmond, Va., A. L. Evans, Chattanooga, Tenn.; O. L. Sands, New York City; Arthur Patterson, Wilmington, Del.; A. F. Williams, Boston, Mass.; Gambetta Staff, Meadville, Pa.; W. D. Sigler, Salem, O. Chas. Sigler, Akron, O.; Irene Harwood Ellis, Boston, Mass.; Jas. H. Overton, Dallas, Texas; F. W. Gage, Chicago; Chas. E. Lorenz, Columbus, Ga.

* * *

Preparations are being made for another edition of the "A. S. O. Directory." All graduates who have made changes in their locations since September last, and have not notified me, will please do so at once. We desire the assistance of all graduates to make this as accurate as possible. Errors will creep in no matter how much time is taken in preparation of copy, and I therefore trust that I may have the co-operation of all interested.

I will appreciate assistance and information from any source. If you know of errors in previous issue, or of changes in location since, please advise me at once.

Respectfully,

J. A. QUINTAL, Directory Department.
Kirksville, Mo.

* * *

Graduate (lady) of the A. S. O., experienced, wishes to act as assistant to practicing osteopath. Address, Dr. R. C., care of 1224 Real Estate Trust Bldg., Philadelphia, Pa.

Removal Notices.

Dr. R. E. Sevier from Monrovia, Cal., to 452 W. Center St., Pomona, Cal.

Dr. W. J. Classen, from Miami, Fla., to Ann Arbor, Mich.

Dr. W. L. Grubb, from Franklin, Ky., to 614 15th St., Des Moines, Ia.

Dr. Elmer T. Hall, from Watertown, N. Y., to 304-305 Lowndes Bldg., Atlanta, Ga.

Dr. Margaret E. Messick, from 305 W. Eighth St., Quincy, Ill., to 446 So. Main St., Princeton, Ill.

Drs. Wm. and Edna Aphrope are located in the Ford Bldg., at Oneonta, N. Y.

Dr. Carl D. Clapp has located at "The Chetwood," Oneida Sq., Utica, N. Y.

Dr. Jno. W. Kinzie has located at Overbrook, Kas.

Drs. Milton H. and Edna E. Sharp are located at Baker City, Ore.

Dr. Carrie B. Taylor has located at Bay View, Mich.

Dr. Geo. W. Leslie, from Moscow, Idaho, to Davenport, Wash.

Dr. E. L. Harris, from Evansville, Ind., to Owensboro, Ky.

Dr. Wm. R. Dozier has moved from the Fourth National Bank Building to suite 603-604 Grand Opera Building, Atlanta, Ga.

Dr. Frank Smith, from Indianapolis, Ind., to Kokomo, Ind.

Drs. J. E. and Hattie M. Gable from Joliet, Ill., to Evanston, Ill.

Dr. Imogene Cooper from New Boston, Texas, to Cor. Bull and Gordon, Savannah, Ga.

Dr. Mary J. Bowden, from 514 W. Washington, St., Centerville, Ia., to 203-4, Bolton Blk., Sioux City, Ia.

Dr. Truman Wolf from Hillsboro, Texas, to Iola, Kas.

Dr. C. N. George, from Deadwood, S. D., to Thedford, Nebr.

Dr. Helen Walker, from High River, Can., to Cayley, Can.

Dr. N. L. Sage, from Dundee, Mich., to 1133 Russell St., Detroit, Mich.

Dr. Ella L. Myers, from Bluefield, W. Va., to 156 West 45th St., New York City.

Dr. W. J. Ford, from Chariton, Ia., to Seattle, Wash.

Dr. C. B. Hutchinson, from Excelsior Springs, Mo., to Macon, Mo.

Dr. Florence MacGeorge, from Missoula, Mont., to Seattle, Wash.

Dr. G. W. Tupper, from Alleghany, Pa. to East Brady, Pa.

Dr. V. L. Springer, from Richmond, Ind., to 9 Welborn Blk., Princeton, Ind., where he purchased the practice of Dr. F. L. Bigsby.

Dr. Frank A. Crofoot, from Port Byron N. Y., to 73 William St., Lyons, N. Y.

* * *

Born—To Dr. and Mrs. George Parks, of Blue Island, Ill., June 16, a daughter.

Born—To Dr. and Mrs. Geo. A. Pontius at Lockport, N. Y., Aug. 12, a daughter.

Born—To Dr. and Mrs. J. J. Schmid at Danville, Ill., July 29, a daughter.

Born—To Dr. and Mrs. M. E. Garrett, July 31, at Detroit, Mich., a daughter.

Born—To Dr. L. E. and Dr. Grace Wyckoff, August 20, at Los Angeles, Calif., a son.

* * *

Married—In this city, August 3, Paul B. Schmunk, of the Senior class of the A. S. O., and Dr. Ida Zellweger, who graduated here in 1902.

Married—At Montezma, Ia., July 5, Dr. Arthur E. Dewey and Dr. Nina Wilson. Mrs. Dewey is associated with her husband in the practice of osteopathy at Atlantic, Ia.

Married—At the home of the bride in Watertown, N. Y., August 24th, Mr. John W. Thompson, of Rochester, N. Y., and Miss Bertha Haller, both of the Sophomore class.

* * *

Died—Mrs. Lula E. Oldham, D. O., wife of Dr. J. E. Oldham, of Hopkinsville, Ky., on July 26, of consumption.

Died—On August 2, Chester, son of Dr. and Mrs. Osborn, of Coldwater, Mich.

The American School of Osteopathy

Post Graduate Course for Two-year Graduates.

The American School of Osteopathy will institute a seven months' post-graduate course for two-year graduates to begin Sept. 4th, 1905. The length of this course has been arranged so as to give our practitioners, together with the twenty months they have already had, a twenty-seven months' course, or a course equivalent to three years of nine months each.

Since the American Osteopathic association has demanded a three years' course and all our recognized colleges have complied with that demand by instituting a three years' course, and since three-year laws have been recently passed in several states, and, without doubt, all future legislation regulating our practice will be upon that basis, the advantages of this course are self-evident.

The practice of osteopathy during the past few years has made rapid strides towards a more scientific basis—much of error has been eliminated and much of truth incorporated. It is our intention to give in this course practical instruction along osteopathic lines with special attention to diagnosis and treatment so as to more completely equip our graduates to conduct a general practice.

The tuition for this course is \$150. There are no extra expenses of any kind for laboratory fees or dissection, and the student is permitted to attend all cases and operations at the hospital without extra charge.

Graduates of recognized osteopathic colleges who have attended twenty months before graduation are eligible to attend.

For further information, address,

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THE HOFFMAN-STILL LABORATORIES.

This institution which is an innovation in osteopathic circles was founded primarily with the object in view to undertake research work along Scientific-Osteopathic-lines and particularly to work out some absolutely unproven and much discussed points for the text-book on Osteopathic Pathology which is being written by Drs. Hoffman and Still. The laboratories, occupying as they do, five large rooms in the building at 603 West Scott street, Kirksville, Mo., and being fitted with all the apparatus necessary for work in pathology, chemistry and bacteriology are as complete and well equipped as it is possible to make them. The promoters of the laboratory have each agreed to give a certain per cent of their outside income to the maintenance of the laboratories and the replacement of the apparatus as needed, so that the success of the project is assured whether the analytical side of the proposition is a success or not.

In addition to the original function of the institution, it has been decided to add a department of a semi-commercial character to which the practicing physician, too busy and entirely unequipped for any but the most elementary tests can send his specimens and have them examined at a reasonable cost being sure that the reagents and so forth will be fresh and correctly made as there are being examined in the laboratories many specimens a day from the A. S. O. and in the near future there will be the added work from the A. S. O. hospital. Also, the medico-legal work of some of the best law firms in Iowa is given exclusively to these laboratories and the facilities for examining blood, seminal stains, poisons and so forth are unexcelled.

Doctor Hoffman who has a Ph. D. from Munich, an M. D. from Heidelberg, Germany and a D. O. from the A. S. O. is a scientist of national reputation and is known as a medico-legal expert throughout the middle west, has had charge of laboratories since he came to America, first in New York, and later in the university of Wisconsin, the government experimental station in Dakota and Minnesota, which latter he left to become State Pathologist and Bacteriologist of Iowa and then was chosen Professor of Physiological chemistry, Pathology and Bacteriology at Drake University Medical School in Des Moines, Iowa, where he became interested in Osteopathy and left Drake to take charge of the Pathology and Bacteriology at Still College. When this college was assimilated by the A. S. O. he and Dr. George Still, the surgeon in charge of the S. C. O. hospital were secured for the A. S. O. faculty. Dr. Hoffman has no superior in his line in the country.

Dr. George Still, M. S., M. D., D. O., who will give particular attention to the post operative and post mortem specimens has had a thorough science training and has in his private collection over 900 postoperative and post mortem specimens mounted for the microscope. The first class in bacteriology in any osteopathic school was under his direction over five years ago and he has taught in summer and regular courses ever since.

Although the analytical work will be entirely under the supervision of Drs. Hoffman and Still there are several graduate osteopaths including Dr. Forest Crowley and Dr. Arthur Cunningham, who have taken a special interest in scientific investigation and will do research work in the laboratories during the next year.

Any osteopathic physician who has any rare post-mortem specimens the diagnosis of which is not to be used in any legal connection can have the same examined free by relinquishing all claim on the specimens, which will then be used for the A. S. O. class work. Formalin is preferred as a preservative for these specimens. In sending substances for analysis the following rules should be observed:

Label all specimens with the name of the patient and of the physician and also mark whether a complete or special examination is to be made. If any advice is desired, aside from the analysis always send a complete history of the case. The methods of packing and the price for analysis of the different substances will be sent on application.

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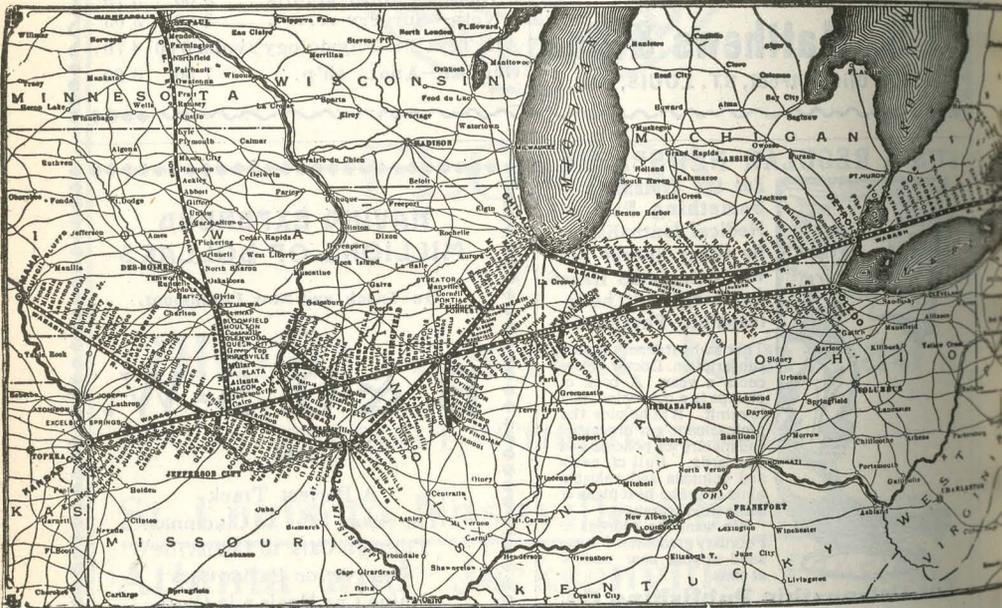
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CALIFORNIA.

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