Revenge by Osteopathy:
a Fable of the Foothills

How the Medical Sharp Gave Bill Askins a Little Treatment That Cured Him.

[Chicago Inter Ocean.]

If you are the type of individual who is being rosted by the populace he will generally be found to have certain talents out of the ordinary. Rockefeller has received more knocks than any one within recent date, and yet when it comes to corolling a real coin of the realm, it's a noble-browed lad with a thoughtful cast of countenance who can beat him at his own game. Just now there is a great dearth in this brand of noble-browed youth.

Now there was the case of Red Riley. He had gone from Brazo fully a year, but when I arrived the natives were still talking about the parsimonious manner in which he handled the truth. It occurred to me that a gent whose achievements are vividly remembered long after he faded away to other fields of endeavor must naturally have some accomplishments. From what I could gather, Red's frugality in dealing with the truth was a matter of general comment, and he inspired a whole lot of jealousy among the local liars who were unable to cope with his weird and wondrous imagery. The enemies ones took advantage of an opportunity to get even, and he was so mutilated that he left the town in disgust.

Bill, posing as a fact juggler and all round champion prevaricator, Red Riley boasted loudly of being something of a whirlwind and human cyclone in the art of self-defense, and Bill Askins accepted his challenge to meet him in a slugging festival. According to agreement, the contestants were not to grab each other by the legs, although they were permitted to indulge in such scientific artistry as biting and gouging. Bill Askins did not live up the pedal seizing clause and, grabbing Red by the leg, threw him to the floor. The defeated slugger complained bitterly of how he had been tricked in an impromptu oration scintillating with choice expletives. As a piece of vituperative rhetoric it burnt holes in anything of the kind ever heard west of the Missouri river. But, Red Riley, in the minority and his effort came to naught. Bill Askins bragged so much about his success that Red was broken-hearted, and one day he shook the dust of the town from his feet. Before going, however, he vowed that if he ever got an opportunity he would swarm all over Bill and make him look as peaked as the last rose of May.

"Not while we air conscious," replied William Askins, acting as spokesmen for the osteopathic profession.

The visitor wore the extravagant clothes affected by the advance agent of a medicine show, while his long black hair, mustache and goatee gave him the general appearance of a loaded dice manipulator. "Evenin', gent," he said, with the polished air of a humble steerer, "hev you-all any objections to partakin' of a little libation with a thirsty pilgrim who hez the price?"

"While we air conscious," replied Bill Askins, acting as spokesmen for the osteopathic profession.

Bill then launched into a detailed story of how he thrashed Red. No visitor ever escaped hearing of that historic event if William was at home.

"Jedgin' frum yer description of this misadventure," remarked Doc, when Bill had concluded, "I think I met him some time ago in Chihuahua. He wuz handlin' the truth in an intrepid sort of style and pinin' fer a fight. He said he never got a straight holt on a man that he didn't lick."

The consensus of opinion was that the man the osteopathist met was none other than the famous prevaricator. Doc Horne decided to remain in Brazo, and an incident took place in the Black Bear one morning that gave osteopathy a great boost. It was standing at the bar near the door talking to the bartender, and at the opposite end of the room was Dummy Link, reveling in the delicacies on the free lunch counter.

Dummy lost his voice, and he didn't speak for years. Doc was dilating upon various kinds of guns, and taking his own shooting outfit out of his hip pocket as if to show it to the man behind the bar, he was about to lay it down on the counter when the weapon exploded. At this psychological moment Dummy Link, who was contemplating a luscious pig's foot with unconquered delight, jumped four feet in the air and let a yell out of him that shattered a chandelier. He had recovered his voice. The bullet from Doc's gun had grazed his throat, and by one of those mysterious freaks of the Neolithic, he lost his vocal cords. Dummy was so tickled at being able to speak again that he cussed himself and the

CONTENTS.
Revenge by Osteopathy: A Fable of the Foothills 1
Lesions—Sense Talk by William Smith, M.D., D. O. 2
Dr. A. T. Still Praises "Osteopathic Healtl" 3
Outlines of the Natural System of Response to Irritation and Injury 4
Editorial 7
A Student's Fancy (Real Stuff, Too) 7
Los Angeles Osteopathic and General Sanitarium 8
Legislative Dangers. C. C. Teall, D. O. 9
Application Blank for A. O. A. Membership 12
New England Wants More D. O.'s 12
Our Osteopathic Opening 14
Not a Pamphlet, But a Service 15
Personal News of the Profession 16
Wants of the Profession 16
THE OSTEOPATHIC PHYSICIAN

everybody with great enthusiasm. He used all the picturesque expressions he knew, and the young fellows of the gang repeated them in a different tone of voice.

About two minutes later the members of the society came to the door. The medical student was rushed into the saloon and placed Doc Horne under arrest, thinking that he had tried to comission murder. They proceeded to hold court in the barroom, with Rio Grande Charley in the chair.

Dummy Link, who was not badly hurt, was trying to tell the assembled company of the air fair that was a bullet grazed his throat and he recovered his voice. He was glad of it. The bartender testified that the prisoner's gun entered the saloon, and the physician made inspection. He was certain that the shooting was accidental.

Rio Grande Charley then said to Doc Horne: "Prisoner, the Necktie Society is the bulwark of peace and order in this community, and cf there is any lynching to be done we do it, a prageral manner. You air charged with shooting our townsman, Dummy Link. What hev you got to say?"

"The bartender says the shootin' wuz accidenital, reckins the doc, "but he is mistaken I did it a-purpose."

"And why did you try to blot out the fair young life of our former reticent and uncom municative member?"

"I didn't try to take his life. I wuz jess givin' him an osteopathic treatment for his voice. You see fer yerself thet he kin talk, and there­fore the treatmeit, which costs nuthin', was a pre-eminent success."

The men looked at each other in amaze­ment, and one of the members of the society: "Isn't this osteopathy play some violent?"

"Thar air cases which require heroic measures," replied the prisoner. "The present op­erating system of medicine is so pre­occupied with your navel, as the patient will no doubt testify. Had I told Dummy Link thet he would be able to talk if I shot him in the neck he would hev said I wuz solicitin' trade for a tomb­stone maker. So I gave him the treatment without his permission. You hev before you, gentlemen an medical illustration of the efficacy of osteopathy."

"I'm afeard yer perfession will be more of a menace than a boon to this peaceful town, if er is common to use yer weepin' as a surgical instrument even man who packs a gun," remarked Elijah Rivers.

Doc Horne hastened to say: "Gents, I'm the first medical sharp who ever used a gun to treat a patient. The case of Dummy Link is a perfect example of the fact that you don't need another like it. The work of my perfession is done solely with the hand and no instruments air needed. To be frank, I confess that in extreme cases the treatment is sometimes a little severe. For instance, when a man is a long sufferer from a complication of ail­ments I begin workin' on him by stirrin' up the cervical region. After submittin' to this neck manipulation I hev known patients to say they could look forward to lynchin' as a posi­tive pleasure. Further down I indulge in the dorsal twistin' of the spine, and I am so fa­miliar with the sensitive spots of the anatomy that by a deft movement I kin dislocate every rib in the body. The vibratory movement con­sists of poundin' on the most sensitive spot, which is mighty stimulatin' to the invalid. Then that is the vibratory movement with the knobs on the face, very vigorously ap­plied. The idea is to stir the nerve centers I pinch the skin all over the body. I kin wrench both legs out of their sockets in a second, and the patient becomes a well man, even if he does get up from the table feelin' like a victim of a ball."

"What's comin' off?" inquired one of the boys.

Rio Grande peeped through the keyhole and replied: "My view is som'what obstructed, but I hedges a medical sharp is stirrin' up the sta­tistical region."

Bill uncor ed a blood-curding whoop that shook the barroom, and the patient becomes a well man, even if he does get up from the table feelin' like a victim of a ball."

"William seems to be allin' some," observed Tom Irwin.

"I'm jes twisin' the dorsal spine of the spine is purty painfull," said Rio Grande, with the easy air of a professional. A terrific bumping followed, and Bill Ask ins' yells for help continued to entertain the assemblage without. Finally all was quiet and the last of the rum was emptin' of his shirt miss­ing, opened the door. The panel completely played out, was lying on the table. He looked as if he had been traveling with a cyclone. "I notice that his gun optic is ready close for repairs," remarked Elijah Rivers.

"Doc, you're an impostor," I remarked, frankly, "and don't know the difference between osteopathy and a hot dog sandwich. Everett can't make a living here.

"Doc, you're a panther," remarked Elijah Rivers.

"Doc, you're an impostor," I remarked, frankly, "and don't know the difference between osteopathy and a hot dog sandwich. Everett can't make a living here."

Doc chuckled softly. As he roade away he looked at the bartender and said: "You form Bill Askins' dad I'm Red Riley, and he'll tell you why."

Lesions.

By William Smith, M. D., D. O., of the American School of Osteopathy.

T HESE words are written in the hope that they may serve as a guide to the student of osteopathy, which which is only apparent, a difficulty largely fostered by the medical profession, which has failed to recognize the value of the osteopathic treatment. A difficulty which when thrown in the face of an osteopath can always be met with incontrovertible argument.

"The term as an "osteopathic lesion"; the title is a misnomer: an abnor­mality of relation between the third and fourth dorsal vertebrae is no more an "oste­ pathic lesion" than is a broken femur an allopatic lesion. They are both lesions without any qualifying adjective attached to them. A lesion may be thus defined: A lesion is any divergence from the anatom.
THE OSTEOPATHIC PHYSICIAN

American School of Osteopathy, Kirksville, Missouri.
March 1st, 1906.

My Sunday Sermon.

Well, Bunting, My old Friend—

Fool or Philosopher?

Allow me to give vent to what I am thinking about and intend to say whether you like it or not.

I have just read your article in March, "Osteopathic Health," and without any flattery, I want to tell you that from start to finish it is the most literary and scientific production that I have ever read from the pen of any writer, on the principle and philosophy of Osteopathy.

I am proud of the production. I am proud of the man who is not afraid to peruse and acquaint himself with all the branches pertaining to the subject of human life, the form of the body with all its parts and functionings, when in normal or abnormal condition.

Go on with the good work, I am glad to have one man who compromises with nothing, not even Truth itself; a man who is ready to offer and stand to the truth without apology.

Please send me a dozen copies, and bill for same.

With kindest regards to you and Mrs. Bunting. I am yours truly.

A.T. Slocum.

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We can only say that an electrical stimulus will, in many cases, produce in a nerve action closely corresponding to that which is produced by the transmission of it to an impulse from nerve cells.

In just the same way there are many different forms of lesions, and while some are gross and palpable, others are fine and hidden; and just as in the case of a reflex act the magnitude of the resulting act is no indication of the severity of the producing impulse, so the finest and least observable of lesions may be productive of the severest disturbance of function and lead to the most disastrous consequences.

Because there is no clinic and palpable disturbance of normal relation we must not be led away into the belief that it is of necessity the causative lesion; that gross lesion may be only secondary to one of far less magnitude and, in its turn, it may act as exciting lesion in the production of a tertiary. Let me illustrate. You sit in a half-open window and a draught of air is allowed to play on your neck. A thermal stimulus produces a contracture of the spasm; the sensory filament of the sympathetic ganglia and bring about perversion, not the osteopath has any individual, and without any affection of the body. Neither the anatomical and physiological condition of the body with all its parts and functionings, when in normal or abnormal condition.

Go on with the good work, I am glad to have one man who compromises with nothing, not even Truth itself; a man who is ready to offer and stand to the truth without apology.

Please send me a dozen copies, and bill for same.

With kindest regards to you and Mrs. Bunting. I am yours truly.

A.T. Slocum.

Osteopathic Health...

The structure normal to the individual, which is capable of causing perversion of physiological function.

That covers all lesions, and neither the allopath, homeopath nor the osteopath has any copyright upon any special divergence from the anatomical structure. I state there "the structure normal to the individual," as each one of us has his own anatomy. There is no standard of anatomy which is normal for all; each has his own which is normal to him.

We know from our days of physiological study that nervous stimuli are of various character. We know that a thermal stimulus will excite nerve action; so may a chemical or a mechanical. We do not know what nerve force is; it is in many respects akin to electricity; but then we do not know what electricity is; it is somewhat akin to magnetism, but we know not what magnetism is; and so it is a divergence from that normal which constitutes a lesion.

We know from our days of physiological study that nervous stimuli are of various character. We know that a thermal stimulus will excite nerve action; so may a chemical or a mechanical. We do not know what nerve force is; it is in many respects akin to electricity; but then we do not know what electricity is; it is somewhat akin to magnetism, but we know not what magnetism is; and so
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and that that perversion is consequent on altered anatomical relation, whether that be produced by a fall, a twist, a muscular contraction brought about by some abnormal physiological impulse—such thing as may cause altered anatomical relation—then he is not an osteopath, whether lesion or otherwise.

If our anatomical structure is normal our physiological processes will be carried on in an orderly manner and we will be in the condition of health; alter that anatomical perfection and necessarily perversion of physiological action results. Perverted physiology is what we denominate pathology, an effort on the part of nature to right an error; we are in ill health.

So if the medical brother asks me if I believe all disease is due to an anatomical alteration I hesitatingly answer him "yes"; not of course of an overtly gross nature. That would not produce a dislocation of the head of the femur from the acetabulum to produce a scientific and practical osteopathy. That is the fourth from the fifth cervical vertebra to produce disturbance of the diaphragm; but we will not contract a zymotic disease if our blood cells are circulating in proper amount through anatomically perfect channels in an orderly manner; tuberculosis need have no dread for us if we are anatomically perfect—but deteriorate our resistant force by any means you please, whether by persistent strain as in a bronchitic cough brought about in its initiation by some irritation of the air passages, whether mechanical by the inhalation of irritating particles, or as a result of pressure upon some nerve distributed to the pulmonary plexus, and you produce an alteration in our histological structure, anatomical, and the haemolysis which may find its nidus. Microtrophic will not grow in normal, living blood; in stagnating, ill oxygenated blood, with the consequent vitality of the whole cells diminished, they will flourish, and the condition produced produces those ideally perfect breeding places.

I do believe that disease can occur independently of the bodily normal body, nor do I believe that any individual can be in health with his bodily mechanism not in its normal relation one part with another, irrespective of the size of the part. Results may be small or large, bearing little relation to the magnitude of the lesion upon which they are consequent.

I am an osteopath, not a "lesion osteopath," just an osteopath, and that is my belief. Just as hypertension and dilatation may produce masking of a stenosis or regurgitation and so produce fictitious health, so we may have the same thing done elsewhere. That is not health any more than is a wooden leg a natural limb. It is compensation, that is the best that can be said for it, and at that rarely perfect and liable to break down sooner or later.

Anatomical and Physiological Pictures of Disease

Outline of the Natural System of Responses to Irritation and Injury.

A Description of the Routine of the Natural or Physiological Morbid Process is Briefly Given.

By E. E. Tucker, D. O., Jersey City, New Jersey.

HE very first response that nature makes to irritation or injury is sensation, or pain. The purpose, or physiology of this response is not to be misunderstood; it is to warn the organism of danger or to inform it of injury. It enforces cessation of the act that is endangering the part, or else compels action to remove either the body or the irritant.

Thus the first response leads naturally to the next—spasmatic action. Sensations of pain are ordinarily conveyed to the brain, and the action produced is conscious. But these sensations traverse the lower ganglia, and if severe, may in them excite spasmotic reflex action before the brain has had time to act. In other words, may short-circuit; the broader co-ordination of the brain offering greater resistance. There are also many parts of the body, for instance, all of the internal organs, which have little or no connection with the conscious mind, and whose reflex action is wholly sub-conscious.

These are responses to irritation. Between this and the response to injury there is an interval characterized by failure of function, or cons-

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fused action, almost as deadly sometimes as the severer stages. When injury is produced, these also may occur, but the action goes farther, and institutes a process of tissue-repairing.

The response to injury is the tissue-repair process.

The mildest form of tissue repair is simple hyperemia. Nature merely sends to the part an increased amount of nutrition, carrying with it an increased number of leucocytes, which are nature's policemen and carpenters; an increased amount of nutrition; an increased amount of oxygen; an increased amount of circulation to flush and wash out the part, and to promote absorption through the lymphatics. This is the purpose or physiology of the action.

In injuries of a greater degree, the hyperemia will be greater and there will be the escape of fluid from the blood vessels, analogous to bleeding—a true bleeding through membrane. Nature sends her policemen, carpenters, etc., out into the tissues and on to the surface. The fluid is not true hyperemia, but is a highly diluted and perhaps otherwise altered form of it. The more severe the injury and the more the contraction of the surrounding tissue, the more fluid is produced. It is the more fluid elements that escape. With a number of the white blood corpuscles are attracted to the seat of injury.

This fluid collects in the areolar spaces around the injury, distending them, and causes the swelling which is known as oedema. Its spread in these tissues is limited by the contraction of the surrounding areolar tissue, confining the oedema to one spot. If not so confined, it would diffuse itself through the whole cellular system.

Most interesting is the physiology of the oedema. It consists of substances either onto the surface or into the lymphatics, and cleanses the wound. In some cases, as in water blisters, its evident purpose is to form an artificial bursa or water mattress to protect the deeper tissues. It also serves, in distending the tissues, to confer rigidity on the surrounding parts, as any motion in them would tend to loosen the clot from the tissue, and cause fresh bleeding, and otherwise to disturb the repair work. The oedema diminishes in inverse ratio as the fibrin is formed. Another purpose served by the oedema is to anesthetize the part. The slow drainage of the oedema is a very nerve filaments until they will no longer respond to stimulation, and so reduces or relieves the pain. This same thing done elsewhere, that distension of the tissues with any fluid will confer local anesthesia on them.

A severer form of injury results in the formation of a false coagulum of fibrin diluted with a great quantity of water. This fibrin is produced by the action upon the diluted liquor sanguinis of fibrin ferment from the nuclei of the white blood corpuscles. "The tendency to coagulation varies with the number of white corpuscles present." (Green's Pathology, p. 151.) When the liquor sanguinis is abundant, and the number of white corpuscles is small, the coagulum is thinner and less pendent than when the liquor sanguinis is nature. In this condition the coagulum is called phlegm. According to the severity of the process, the phlegm shades off on the one hand to a more thickened oedema, and on the other, into the film "false membrane." This phlegm does not really form in the tissues (as coagula do), but in the stream of phlegm (phlegm corpuscles) and therefore escapes on to the surface.

There a coagulum forms, consisting of fibrin (the small round cell leucocytes), and some red blood corpuscles." (Green.) Clin-
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ically, phlegm is observed to form simultaneously with the subsidence of the oedema.

But in severer cases, phlegm is observed to form in the tissues; or, in conditions in which the oedema is retained for a considerable time and is not absorbed, or finds no channel of escape, phlegm is formed in the tissues.

The purposes of this formation are similar to those of the coagulation of the blood on wounds; to remove substances not removable by the oedema, entangling them in its mesh and carrying them away with it; to afford a protective covering to an irritated surface; when it occurs in the tissues it serves as the walls of a laboratory in which a liquefaction and loosening of the tissue too badly injured may take place, or in which a combative process against germs may be carried on without injury to surrounding tissue; or it may serve as the wall of a passage through which pus may be excluded.

In the next severer conditions, the coagulum becomes firm and membraniform. The formation of membrane is seen to be almost invariably preceded by the formation of phlegm, which becoming gradually firmer, appears at length as membrane. It is conceivable that the membrane might form immediately, without the intervening stages, should the condition become severe enough to allow the almost pure liquor sanguinis to be thrown out at once; but the usual sequence of changes shows the relation between the stages. In actual wounds of the mouth, where the firm local fluid keeps the crusts soft, and washes away the red corpuscles, we see not a crust, but a fibrinous membrane covering and closing the wound. Under any fresh crust will be seen a similar membrane, formed after the escape of the red blood cells has ceased, and from the capillaries exudes the purer fluid, from which evaporation is prevented by the overlying crust.

The modus operandi of this series of actions is exactly the same as that found in physiology, as was shown in the previous chapter. It is automatic, as was partly shown there. The succession of stages is also automatic, depending upon the degree of irritation with which the nerve mechanisms are affected. The excess of stimulus overflows first into the nerves that are functionally most sensitive, the sensory nerves. Then if the commissio­nation has not made, it next overflows into the next most sensitive nerves, the motor nerves. The limits of irritability of the vaso-motor nerves are not reached until some of the motor nerves are passed, as a rule. (See Diathesis.) Into them the irritation next overflows.

The most sensitive part of the vaso-motor mechanism, or the functionally most active part, is that part nearest in contact with the cerebro-spinal nerves, the arterioles; hence arterial congestion is the first stage of inflammation. The irritation overflows next into the sym pathetic nerves, and contracts the blood vessels, producing the series of changes in secretion already noted in Chapter III.

In some cases another stage may follow this, i.e., the liquefying of the fibrin. It is not known that the nerves produce this stage; but it is probably a part with the body's power to digest substances injected subcutaneously. Thus it is at least physiological. Liquefied fibrin forms pus. The body has not been accredited with the power to produce this, but its production is invariably ascribed to bacteria. If bacteria possess any such power, it is probable that the cells of the body, which are certainly more highly excited forms of life, possess the same power. Moreover, the body seems able to produce such liquefaction at will, and it does not seem that the presence of germs invariably produces it. It is local enough to assume that nature would not allow herself to be caught in such a predicament as to be unable herself to remove a substance that she herself has formed. This process occurs when it is necessary to linsefy and remove fibrin, as when it forms in deep tissues; when

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it is necessary to remove a fibrous membrane from the surface; it then occurs not at the surface of the membrane, as would be the case with bacteria the cause, but at the base, where the fibres are joined to the tissues. It occurs in the normal course of absorption of inflammatory exudate in pneumonia. It occurs when tissue has been torn away from its nutrient arteries, or when it has been too badly damaged to be restored. This tissue is liquefied as is the fibrin, and is removed as pus. This liquefying also is probably accomplished by the secretion of a ferment, seen with special clearness in pneumonia.

An important point is that not only the fibrin ferment, but also its liquefying ferment, have power over the tissues of the body. It is the power of these ferments to act on any tissue that is not vigorous and resistant that makes the suppurative process so dangerous in the body. Now, the normal course of this pus, when not excluded through some channel, is to be absorbed; and it may often be absorbed in such great quantities as to exceed the powers of the body to neutralize it, so escaping into free circulation to attack the non-vital elements of the blood and deteriorated body cells.

Suppuration occurs also, when bacteria have obtained access to the tissues, and are proliferating in the unprotected substances, such, for instance, as the inflammatory exudate. The purpose of this suppuration is to destroy these bacteria—and is much more certainly their work. For instance, no bacteria are found in the pus of tuberculous abscess.

It is not to be lost sight of that these formations, phlegm and membrane, are the temporary ones, which disappear in time: under certain which the permanent repairs are carried on. Anticipating our later work, we would therefore expect to find the former present in acute conditions, while the chronic conditions would be characterized by the latter.

The permanent processes are the proliferation of the resident tissue cells to restore the losses, etc. (See final chapter.) These new cells are connective tissue cells, but are always less perfect in type, being formed in haste, and having, as a rule, no other purpose than that of forming fibrous tissue, which shall contract and restore continuity and strength to the damaged parts.

While these processes are going on in the tissue where the inflammation is located, there are accompanying general changes in the body. These general changes are also quite parallel to similar changes noted in normal physiology. For instance, during digestion there is a stimulation and a glow over the whole body, the muscles feel comfortable, the brain cheery. A little bit later, when the blood is demanded for digestion, it is apt to be withdrawn from the brain, and leave a sleepiness in its place.

These are paralleled in the function of response to irritation and injury, by the chill and fever. There is first the reflection of the heightened nerve pressure and disturbed co-ordinations to all parts of the system, particularly such as may be related, resulting in apathy and weariness, or in acute stimulus, perhaps in tremors, or other evidences of the heightened pressure whose character will depend upon the diathesis of the individual. In the next stage, the concentration of circulation at the one part, to carry out the various purposes of the process of repair, implies a corresponding diminution of the blood in all other parts; indeed, this concentration in one part is caused largely by the contraction of the rest of the system. Nature first withdraws the circulation from parts where it is least needed, as the skin and muscles, leaving the extremities cold, and chills over the body. The chill appears to precede the fever, but in reality is but the

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first noticeable effect of the onset of fever. Chili and fever are complementary parts of each other. The patient usually promptly protects himself in cases of chill, by warmth and covering, creating artificial compensation. Nature also promptly begins to absorb fluids from the tissues, wherever they can be sacrificed, to increase the amount of blood in circulation. The contraction of the areolar tissue which is part cause of the "goose flesh," so often noted, is designed to increase the pressure on the lymph spaces, to hurry the circulation of lymph, and to keep that also—amounting to several pounds—in the blood channels. The great thirst is nature's way of demanding more fluid for her blood-channels.

I have often seen pimples, abscesses and swellings absorbed clean, in the great demand for fluid. The fibrin from the pimples and abscesses was no doubt promptly thrown out as phlegm, at the site of the inflammation, for nature always sacrifices her poorest elements for such purposes. In a case of smallpox in Kirkville, in 1902, I noted a case in which a cold abscess of the shoulder was completely absorbed, upon the advent of the disease. The production of toxins by such radical action is no doubt one of its most important features, but one of which, unfortunately, little actual knowledge is at hand. In emergencies, nature is apt to sacrifice anything to the emergency, making drafts upon her capital and binding herself for future work to any extent demanded by the emergency. Unfortunately, these activities are all automatic ones, not naturally checking themselves when a dangerous indication arises, but continuing to act subject to the automatic forces, so long as the conditions therefor continue to hold.

Other changes, often general, occur as the result of the action of this physiological response to irritation and injury, also paralleled in physiology. When, for instance, the stomach is required to do prolonged work of an uneven character, say when it is required to digest solid fruits in great abundance, its great drain upon the alkaline resources of the body is apt to cause a strain or an upsetting of the chemical balance of the body, to meet its requirements. This then ranks as a physiological effect of the process.

There is a chemical equilibrium determined to exist between many organs, as between the genital organs and the fats; between the pancreas and the liver, etc. But the emergency functions of the body, taking precedence of the normal demands, may upset this equilibrium, and have consequences far removed from the organ where the original fault lies. Auto-intoxication may arise in this way—a physiological effect.

So also, the excessive activity may disturb other—or any—metabolic process. Under normal, quiet stimuli, that is when functions are carried out under the normal effective stimulus, the katabolism is perfect; perfect, at least, relative to the standard of the body. But when the rule is broken and excessive action required, katabolism is not the effect, the katabolism is disturbed and auto-intoxication may follow.

In all reactions of organic chemistry, particularly in the living body, the time element is a very important element, and may highly vary the results of stimulation causing change to be given under Biology, the concluding chapter of this series, to show that in the synthetic action of the body, the time element is the determining factor. The time element is the point to which there is a distinct shading of one into another, the closeness to type depending upon the rapidity of formation. Here again is a verification of the uniform etiological principle, where it is shown that the normal development of cells is under the minimum effective stimulus, and that as the stimulus is increased, the result of that point, the resulting formations vary more and more from the normal. The difference would seem to be a purely numerical one, and the factor that determines the character of formation would seem to be time, or, otherwise stated, the degree of stimulus causing it.

So in the ordinary nutrition of the body, the relative velocity of the changes determines the result. Sleep is required for the most perfect nutrition when no interference of any kind with the affinities of the molecules is present. During waking hours, toxic products are continuously formed and being formed. During the hurried driven action of the response to emergencies, the toxicities of a more angry character, the poisons of which are better known. Diabetics, arising in the majority of cases in connection with tremendous mental strain, is one instance of incomplete katabolism, in which the character of the reaction varies with the degree of the irritation. Bright's disease, of which some cases arise from prolonged mental worry, (the effect of great mental excitement upon the kidney centers is a matter of popular knowledge), presents in these cases other instances of failure of perfect katabolism, and the overwhelming of the kidney with its products.

Besides these forms of disordered katabolism, there are disorders in the enzymes, of which there are, as is now be (Continued on page 14.)
THE OSTEOPATHIC PHYSICIAN

The Organ of News and Opinion for the Profession.

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HENRY STANHOPE BUNTING, A. B., D. O., M. D., President and Manager.

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Fairness! Freedom! Fearlessness!

EDITORIAL

"Here to the line, let chips fall where they will!"

GOOD CHEER FROM FATHER ANDREW.

We are very proud indeed of a letter which "Perseverance" wrote us two weeks ago, praising Osteopathic Health, and so proud are we of these words of good cheer that we share it in its entirety with our readers of the paper. Such praise from such a source brings added responsibility to one who receives it. It is an injunction to work harder and more conscientiously in the future. It is a call to the exercise of greater conservatism lest such commendations should turn out to be in vain. We, like a man who has back then and now when we are out on the firing line, and its does every soldier good to know that he has the approval of his captain-general. We shall labor early and late to be worthy of this high praise and to make good to the cause we represent.

LIMITED OR UNLIMITED?

According to the Des Moines newspapers there was an interesting little tilt at the recent meeting of the Seventh District osteopaths at Des Moines, February 14th, when Dr. Charles F. Proctor, of Ames, took a fall out of Dr. James A. Still, of Still College, for innsuing that osteopathy is good, and limited in its application to the "day-dreams and to bubbles, and to shin­o' win the maiden? Tell gr.

We shall labor early and late to make good to the cause we represent.

to a finish. In doing this he will be backed up by all the other osteopaths in New York State. Dr. Bandel has fully complied with the provisions of the law and for this reason this medical doctor is therefore very much as well as unjust. As Dr. Bandel sees it, res­fusal to honor his death certificate is merely a part of a plan to establish a dental health board to hold out in its discriminations against osteopathy. Dr. Bandel, whose offices are 188 Hancock street, Brooklyn, has been in practice in Greater New York for ten years and has a host of friends both within and without the profession. Success to him in his righteous contention!

SOME PRODUCTS OF 4-YEAR MEDICAL EDUCATION.

Dr. Henry Beates, Jr., head of the State Board of Medical Examiners, made a lantern slide lecture at the Philadelphia College of Physicians and Surgeons recently, exposing the ignorance and illiteracy of many medical graduates who complete the four year medical graduates for licenses to practice and deal out liquid and powdered death war­tants to hapless multitudes of people.

Some of the arguments show that there are "cattle" breaking in, or trying to break into medical practice, after all, and they are not in this instance inside that profession. Dr. Beates has studied the questions and answers as given by Dr. Beates and printed in the Philadelphia North Amer­ican February 24th.

"Still our medical friends insist," Dr. F. L. Antes, of Kane, Pa., writes, in commenting on this case, "that we osteopaths are an educ­ated body."

Question: Describe in detail the mechanism which regulates intestinal peristalsis.

Answer: The rate at which the bowels move is determined by the state of the smooth muscles of the colon. The rate of peristalsis increases in response to the ingestion of food.

In answer to the question, "What are the symptoms of aneurism of the arch of the aorta?" one medical graduate has this, in part, to say:


Question: Describe the three principal func­tions of the liver.

Answer: The liver furnishes what is known as bile, containing the elements of converting starches into sugars. It has the function of power of internal secretions.

Here the examiner has written in the words: "After four years in a "medical college"?

Question: Describe any nitrate; give methods of administration, and dose.

Answer: It is a whitish colored solution or powder, and may be used external, hypo­dermically or by inhalation. If given internally, discontinue the drug.

And still— with such exponents standing for the wonderful perfection of knowledge resulting from four-year medical education—the medical college of the city. Dr. Henry Beates, Jr., will continue to represent the osteopathic profession as unlettered!

WOMAN OSTEOPATH SUES HOSPITAL.

Dr. Margaret H. Allen, of Brooklin, N. Y., has begun suit for $25,000 damages against the Prospect Heights and Brooklyn Fraternity Hospital, claiming that she was discrimi­nated against as an osteopath and was not al­lowed to enter the hospital to treat a patient whom she had put into the institution. After a discussion of the case with the patient, her husband was told he would have to get another physician to treat the case or take his wife out of the institution. Dr. Saunders, house physician, called up Dr. Allen and told her somebody in the board of managers "had raised a fuss about allowing an osteopath to treat a patient in the hospital," and that she could not come in to the hospital professionally. Yes, the good Lord and the jury give Dr. Allen the $25,000 and they establish a precedent, in the nature of a useful hint to future bigots who feel called upon to insult osteopathic dig­nity, but who try to make your blood boil—these persistent and insolent insults of our dear medical brethren!

A Student's Fancy.

In the spring a student's fancy turns to almost anything.

To the dew-drops on the flowers, to the birds sweetly singing.

To the star of his affections, to his heart's ache and his burn.

To all things in all directions—but the lessons must not be shirked.

In the spring a student's fancy turns to picture­hats and flow'rs,

To morning's incense, and to song at twilight hours.

To the charm of necromancy, to a social cup of tea,

To 'most ev'rything, I fancy, but Anat-o-me, oh my!

In the spring a student's fancy lightly turns to the sun and the moon.

And to day-dreams and to bubbles, and to shin­ing stars.

To a couch of thornless roses, to a life so full.

To 'most ev'rything, I fancy, but Anat-o-me, oh my!

Where, or where, were the Anasto-Moses when they were so wise?

In the darkness, or the knee-Joint? Some of us wele.

If we all but only Pneu-mo-gastric reflexes, and

We would truly be elated. It would help us a

so much.

Chemistry's a lovely story, but the plot is hard to see.

Does the "Villain still pursue her," does he laugh with fiendish glee.

Does he get his earned quietus when the story's all done.

Does the hero win the maiden? Tell us, tell us.

Scores of swallows can't make summer, but one

frog can make a spring.

Sing the chorus "Di-car-box-yly, methyl, Ethyl hold my head.

Box-car-ly, chloriformus, Osterize us, strike us dead.

In the spring a student's fancy turns to any­thing.

Can he swear, resolve, sign pledges that his les­ons shall not shirk.

But his fancy's like a kitten that's transported in a sack.

We were fine—and unexpected—that the feline will come back.

In the spring a student's fancy has a tendency to do so.

To the land of Oh-be-joyful—and its azure.

To the land of sun-kissed peaches, wine and

Blue-ribbons.

Where pipe-dreams are truly real, and reality's a dream.

No. 267 E. Fillmore street, Kirkville, Mo.

Warriors, He!

If I knew you and you knew me—

Couldn't he reach the disease?

And with an inner sight divine

And the meaning of the splendor of mine.

I'm sure that we would differ less

And if our hands in friendship,

That thoughts would planners all,

If I knew you and you knew me—

Nixon Waterman.

A New Form of Grip.

The doctor gave Holdrite up.

"Couldn't he reach the disease?"

"Yes; but he couldn't reach his pocket­book."

-Aurora (Ill.) Bracoo.
THE OSTEOPATHIC PHYSICIAN

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Dr. Harry W. Parbs, Chief of Staff.
Dr. Jennie C. Spencer, Women's Dispensary.
Dr. Charles H. Spindel.
Dr. Julian McNaughton, Surgeon.
Dr. J. A. C. Stoff.

and the Physicians of L. A. C. O. Staff.

Dr. Bet C. Shaw, House Physician.

When modern civilization began to penetrate this San Gabriel valley, now of world-wide repute for its health-restoring qualities, the Franciscan Monks had their famous missions established at a number of those sites best suited for domicile and for agriculture and horticulture. But the earliest site occupied distinctively as a mountain-side hostelry for health-seeking travelers, is the plateau or mesa leading down from Davis' Canyon, between the two trails to Mt. Wilson and known as Sierra Madre Villa. For more than four and a half years, tourist guests were taken to this ideal spot to view the magic scene that lies spread in panoramic view before the eye. Mountains, valley and ocean contribute to the unusual landscape. There are as many climates in this valley as there are different elevations and distances from the sea. Nervous maladies do not find a favorable environment too near the sea, nor at too great an elevation. The altitude of the Villa Sanitarium, 1,350 feet, has proven favorable for the recovery not only of mental and nervous, but bronchial, heart and many other diseases. The altitude and distance from the sea give an atmosphere of maximum purity and ideal dryness. The temperature, likewise, is never cold and, in the shade, never hot; neither frosts nor the fogs of the valleys roll up to this altitude, and the snows of the mountains never come down to it. It is one of the few locations, even in this favored land, where harmful frosts never touch. The mignonette, calla lilies, heliotrope and verbenas grow perennially.

In an hour's climb up Mt. Lowe or Mt. Wilson trails, one can relegate to a snowstorm. In another hour's ride on the electric lines one can indulge in ocean baths or a fishing trip to the sea, and from the ends of the hotel and grounds, the view is a vast panorama. The Sierra Madre line of the Pacific electric cars has a 45-minute service from Villa Station; fifteen minutes to Pasadena, five minutes to Sierra Madre, east, or Lamanda Park, south. The Santa Fe railroad station, is Lamanda Park, two and one-half miles. Conveniences from the sanitarium meet all cars, by telephone appointment.

The sanitarium is of two and three stories and extends more than 300 feet east and west, in separate suites, each having north and south lighting. Along the entire south side extends the famous sun parlor, 210 feet in length.

At the west end is the administration build-}

ing, including the large parlor, the offices, waiting rooms, reading and library rooms, barbershop and physicians' offices. At the east extremity are located the kitchens, store-rooms, dining rooms, billiard and recreation rooms.

The institution is amply supplied with private baths and all modern conveniences. Sixty-six suites for patients are included. By their arrangement in suites with separate entrances, toilets, baths, etc., the utmost privacy is afforded.

The grounds include 150 acres of plateau, mountains, canyons, orchards, flowers, fountains and vineyards. The main canyon, with its never-failing mountain stream of pure snow water, falling in cascades and waterfalls, lined with mountain flowers and ferns, is an unceasing source of diversion. Climbing its trails, one connects, at an altitude of about four thousand feet, with the new trail to Wilson's Peak.

Special attention is given to the care of chronic cases and elderly people, in senility, who may here have every care and comfort at the very lowest expense consistent with the service.

Skilled nurses of large experience are in attendance.

The table is satisfactory to all patrons.

Our own head of Jersey cows supplies pure milk and butter. Every healthful diversion for those who need it, is supplied.

Terms, $15.00 to $50.00 per week, according to nursing required and apartments occupied. This includes regular osteopathic treatment. Obstetrical and surgical cases at moderate rates, under skilled physicians.

For further information, address Sierra Madre Villa Sanitarium, B. S. Weymouth, Secretary, La Manda Park, Cal., or Dr. A. B. Shaw, President, 318 Clay street, Los Angeles, Cal.

Legislative Dangers

By Charles C. Teall, D. O.

Perusal of recent literature on the subject of legislation would lead one to believe that the sole decision as to an independent or composite board lay with the osteopaths; that it was for him to say what he wanted and get it just as easy, and that where composite boards are now in existence it has been the result of poor selection on the part of the osteopaths. Nothing could be more misleading and dangerous, for the policy of the medical men, having failed by sneers and force to stop our wonderful growth, is now to regale us as out of existence.

For that reason legislation along lines favorable to osteopathic growth is becoming more and more difficult, as it is easy for them to convince our friends, lukewarm or otherwise, that in "giving us just what other schools of medicine have" they have fulfilled their duty to us and their constituents.

The average legislator who votes for us does so at great danger to his political fences and future career as a statesman; so when he can vote for a composite board and not offend his M. D. friends and supporters and at the same time satisfy the importunities of his osteopathic constituents, he sleeps more easily at having
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THE OSTEOPATHIC PHYSICIAN

Dodged both Scylla and Charybdis. It is
not hard for him to take this position either for he
asks:
"You do the same work as other physicians: treat
the sick?"
"Yes.
"You use the same text books and study
the same subjects?"
"Yes.
"You maintain the same standard as other
schools?"
"Yes.
"Then, why not take the same examination-
are you afraid?"
"No."

Then you explain that osteopathic theory
is absolutely different and must be built up along
different lines. That is too subtle a distinction
for him. Then you speak of your fear of bias
at examinations and he asks if you can cite
an instance and if your osteopathic member
cannot look past his own. What can you
say to such arguments to change a man who
does not want to change?

It is a mistake to think that others are as
vividly interested in giving us what we want
as we are in securing, for the unseen forces
which are at work in any legislature are be-
yond comprehension to the outsider. The
psychology of vote-getting shows a curious
analysis.

Pure reason—limited amount.
Sentiment—occasional outbursts.
Justice—a trace.
Conscience—sporadic cases.
Extraneous and other influences—90%.

A glance at the history of our legislative
laws shows strange facts. One state passed
a very good law before an osteopath insid-
cated in its borders. Another got regulation
as a joke on the medical men. A third fought
for 10 years, putting forth effort with a re-
gard to cost of time and money to get what-
protection.

Conditions are different in every state. Ohio
asked earnestly for a separate board. So did
the barbers, horseshoers, trained nurses, under-
takers and perhaps the barkeepers and hack
drivers. Said the solons: "There are too
many boards now; you doctors get together
and we will put it through." Yet it took two
sessions to get the composite bill passed with
our greatest legislative general in command,
assisted by the astute men of that state who
grace our profession.

There has never been any complaint from
Ohio. Why? Because they took advantage of
their strength to get, if not what they wanted,
at least the best possible. And that is the
crux of the legislative situation to-day. Let's
take a specific instance and not talk in glit-
tering generalities which read well but do not
pass bills.

In this state the governor is with us; the
president of the senate is with us; the speaker
is with us, as likewise a majority of the senate
and a goodly number of the house. Every-
things, it is announced, is ready but the mere
formality of passing the bill. But wait—there
are three allopaths in the senate and three al-
lapaths in the house. Did you ever notice
how much more one allopist inside the rail
can do than one dozen osteopaths outside?
Likewise, the ablest senator is probably the
paid attorney for the state medical society
and is our bitterest foe; but what of that?
Our cause is just and right must prevail, al-
though it is rather embarrassing to find a com-
mitee to have the bill referred to and ever-
see the light of day.

A preliminary skirmish, however, landed it
in public health committee, with three pill
doctors and two easy ones to sit in judgment.
To go there was indeed the casting of Daniel
in a liar's den. It shimmers for four weeks
when an appeal to the president of the senate
results in forcing a report in the form of a
substitute which the attorney general promptly
pronounces unconstitutional. This creates so

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LAST WORD!

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much feeling that the committee is discharged from further consideration of the bill—action not often taken in minor bills.

Why, where shall it go—for we are allowed to pick the judicial judiciary? Why, of course, a committee of lawyers will be without bias—but there is the friend of the statue. President Pro tem chairman, instructed to move the death of the bill which would mean no legislation that session. A storm of protest from the state and fisheries and to it we go for four of our tried and true, steadfast, die-in-the-last-ditch friends are on that committee. Also, the friend of the State Medical Society. Still our four champions will see justice done.

Now is the critical point of the contest. The hosts of pilldom are badly shaken and an offer of compromise is made. A poll of the senate shows that we have a majority but that they are of the opinion that a joint board is the thing for reasons before given. See what four weeks' delay has done. Now is the time to get what we want in another form, but the osteopaths stand firm. Separate board or nothing; so their representative refuses to treat with any compromise, bringing down the wrath of their warmest friend in the senate on his head. He reported to the osteopaths that their representative was ultra suspicious of pill doctors and would not meet them half way.

At last the bill is again reported and it is the public health committee substitute made complete. President Moore instructed to move the death of the bill which would mean no legislation that session. A storm of protest from the state and fisheries and to it we go for four of our tried and true, steadfast, die-in-the-last-ditch friends are on that committee. Also, the friend of the State Medical Society. Still our four champions will see justice done.

Then the senators congratulated the osteopaths on their great victory. Fabula docet. If it all right to yell "independent board or nothing," but when circumstances make us feel the legislature makes up its mind to give us something it is up to us to get the best terms possible.

Let's not be Cassabiancas on the burning deck when all the rest have fled and make needless martyrs of ourselves, but drive the hardest bargains possible. In the case cited above there is almost nothing the pill men would not have granted rather than return the calamity of a separate board. And so let's fight for one independent board and if it is not wise as a serpent and get everything possible when that is unattainable.

All legislation is bound to be restricted and independent boards should not mean an easy way of crawling under the canvas. President Moore found an intolerable condition of affairs in the board he graces and, like the brave man he is, protested, but he does not report any discrimination. There is nothing new in the discovery that the pill doctors do not love us—never loves anybody but himself and is not always sure of that; but that need not mean that examinations cannot be conducted fairly. It is a hard question to evade when we are asked, "Are you afraid?" And so when any state goes in for regulation let them be prepared to take what they can get if impossible to get what they want. The great menace to osteopathy is not in the composite board but in that murderous four-year clause. Eliminate that at all cost for we must not expect the impossible of our schools as was the case on the canvass on the burning deck when all the rest have fled and make needless martyrs of ourselves, but drive the hardest bargains possible. In the case cited above there is almost nothing the pill men would not have granted rather than return the calamity of a separate board. And so let's fight for one independent board and if it is not wise as a serpent and get everything possible when that is unattainable.

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Assimilation in Pennsylvania.

THE Fayette County, Pennsylvania, Medi­cal Society, held its annual meeting at Uniontown on March 3d. Needless to say, it was held for the purpose of educating the physician public and osteopaths met in this way of medical legislation. Of course they took a rap at the osteopaths—not at osteopathy, however, so much as usual. A noticeable feature was the fact that instead of condemning the science, the M. D.'s endeavored to show that osteopathy is only a small part of the science of healing which the M. D.'s alone have the right to practice, and that "osteopathy was practiced years and years before the 'father' of osteopathy was born. Which only tends to show that they are here, as elsewhere, adopting the method of assimilation for their effort to wipe us off the face of the earth.

In view of this fact it behooves every D. O. and osteopathic fratemity to make every possible occasion to draw a clear and distinct line between the practice of medicine and the practice of medicine and the practice of osteopathy, for the purpose of identifying it as a complete system of healing. Your repeated warnings in The O. P. against these methods are good—Roy W. Marsh, D. O., Connellsville, Pa.

Gulf States Osteopathic Society.

The Osteopaths of Florida, Georgia, Alabama and Mississippi met in Montgomery, Ala., Saturday, Feb. 12th, and organized the Gulf States Osteopathic Society. There are nineteen-six practitioners in these five states and we hope to form a strong organization for the advancement of osteopathy in the south and, as far as we are able, to promote the cause everywhere. We are going to make a special effort to have all our members join the A. O. A. and expect to have a good representation at the meeting in Manchester, Miss., next August. More than one-third of our members already belong to the National Association. In our organization the constitu­tion and by-laws will be such that we will follow as closely as our local conditions would permit. The following officers were elected: President, A. C. Ogle, Beauregard, La.; vice-president, Dr. Charles S. Fisher, Miami, Fla.; secretary, Dr. Frank F. Jones, Tampa, Fla.; treasurer, Dr. Grace B. George, Mobile, Ala.; Mr. C. G. Hughes secretary and treasurer. The annual dues were made $5.00. Plans were adopted as to how the legislative fight two months off will be conducted. We have in Dr. Graves an able leader who has already displayed his good judgment by appointing three of the committee, which is to be conducted by such a small majority. Our president made us an enthusiastic address and inspired us all to leave no stone unturned in our fight for the advancement of osteopathy. A great deal of credit is due Dr. Earle McCracken, of Shreveport, for the energetic manner in which he got round and signed up nearly everyone present to membership to the A. O. A. Because of the fact that the M. D.'s were so bitterly defeated by us at the last session of the legislature they have been very energetic in seeing that only men favorable to them were elected and re-elected this year. Quite a number of their own profession have been elected, whether they have a majority or not cannot be ascertained until the membership is completed. We make a thorough canvass of both houses. Not all of the members of the profession have been here and we will try to go forward and assist us in what will undoubtedly prove the hardest fight our science has ever had in Louisiana—C. G. Graves, D. O., Secretary, New Orleans.

Minnesota State Association's March Meet.

The Minnesota State Osteopathic Association held its annual meeting on March 6th in the Medical Block, Minneapolis. Several interesting clinics were presented by the various hospitals. Some benefit was derived from the discussion of nervous diseases in children as illustrated by these clinics. The caustic lesions were pointed out and methods of correction demonstrated. Dr. Stevens, although a recent comer from Iowa, gave a well received paper on gynecological subjects—a case was cited and conclusions drawn as to indications for local examinations in girls. The doctor was listened to in detail and the technique of treatment worked out. A practical demonstration on a live subject made a fitting conclusion. Another feature of the meeting was the treatment of fractures by doctors Cowell and Moore and further entertainment provided for by clever stories told by our president, Dr. F. C. Pickler. Minnesota has enjoyed the pleasure of having George H. MacKenzie, of Elko, N. B., in our midst for some time, he is steadily advancing along the lines of strict osteopathy, and is demanding a pure, unadulterated osteopathic treatment. An effort is being made by the program committee to furnish instructive programs for each meeting, and we give our hearty and cordial suggestions for the general welfare and success of our practitioners. The April meeting will be held in St. Paul.

City Practice for Sale.

An Osteopath, with a well established practice in a city of over 500,000 population in the "middle west," will sell at a bargain. Practice is about eight years established. The office and equipment are fine. The owner will sell practice and residence, or residence only, as he is going abroad to reside. A good bargain for the right osteopath with cash. Book records will show this practice to be most satisfactory. Address, "GOING ABROAD," care The O. P.
take the second semester work, etc., and that they may continue this program until they have completed the entire osteopathic course. The tuition for this term will be the regular tuition of $75.00 per term. All the apparatus and college supplies will be better for the use of students in this course.

Third Illinois Will Determine.

The Third Illinois District will meet at the office of Dr. Hemstreet, Galesburg, April 1st, at 1 o'clock sharp. All the third districts are urged to be present, to coordinate the work. Dr. Hemstreet begins the program. The program includes Diet in Special Diseases, i.e., Typhoid Fever, etc., by Dr. W. J. Hays, Moline. Diabetes and Lithemia—Dr. C. M. Sperry Kewanee. Menstrual Headaches—Dr. M. P. Browning, Macomb. Discussion—Dr. Elvina McClellan, Monmouth; Dr. Minnie Maybiller, Abingdon. Osteopathy in Acute Appendicitis—Dr. H. P. Ellis, Canton. Discussion—Dr. W. J. Gilmer, Monmouth; Dr. Etta O. Chambers, Geneseo. Mertritis, Prolapsus and Adhesions—Dr. Daisy Walker, Quincy. Discussion—Dr. Cora Hemstreet, Galesburg; Dr. C. E. Stewart, Moline. Differential Diagnosis and Treatment of Gall Stones—Dr. W. W. Boyer, Peoria. Discussion—Dr. E. M. McKinney, Monmouth; Dr. H. J. Elsea, Carthage.

Fourth Illinois—All There!

The Fourth Illinois District Osteopaths held their convention at Bloomington, February 28th, which was worth-while splendid attendance and excellent fellowship. The meeting was held at the Illinois Hotel. Dr. Carl P. McConnell, of Chicago, made an address and conducted a clinic. Plans were discussed for perfecting the Illinois Association and handling the legislative problem. Of course, President E. M. Browne, of Dixon, was there. A banquet was served in the evening. Those in attendance were: Dr. Wm. A. Atkin, Clinton, Ill.; Dr. E. W. Atkins, Bloomington, Ill.; Dr. E. B. Burner, Bloomington, Ill.; Dr. J. D. Cunningham, Bloomington, Ill.; Dr. A. E. Daugherty, Bloomington, Ill.; Dr. Eliza Manthe, Bloomington, Ill.; Dr. C. P. Compton, Baymiller, Abingdon; Dr. Charles Windell, Peoria, Ill.; Dr. E. G. Magill, Peoria, Ill.; Dr. C. R. Boyer, Peoria, Ill.; Dr. B. C. Roberts, Lincoln, Ill.; Dr. W. C. Swartz, Danville, Ill.; Dr. Lewis F. Culi, Paris, Ill.; Dr. M. P. Browning, Macomb, Ill.; Dr. C. L. Gallivan, Normal, Ill.; Dr. Elmer Martin, Decatur, Ill.; Dr. J. Noone, Pontiac, Ill.; Dr. Carl McCallough, Chicago, Ill.; Dr. E. M. Browne, Dixon, Ill.; Dr. Overton, Tuscola, Ill.

New Bill Up in Jersey.

Next to the Local Option bill, a bill introduced by Assemblyman Morgan of Essex to license practitioners of osteopathy in this state, is bound to be the most interesting of the session. There are several hundred osteopathic physicians, men and women, in New Jersey and all but a few of them demand the protection the public from osteopathic quacks. The bill provided for the licensing of only enactment of a law which will, as they claim, registered graduates of legally incorporated osteopathic colleges. The medical doctors of all schools are against the bill. They bitterly opposed a similar bill last year and the year before. A date for a public hearing on the Morgan bill has not yet been set.—Jersey City (X. J.) Journal.

Want Cataract Data.

We would like very much the assistance of the osteopathic physician, writes a Canadian D. O. We have been consulted as to the possibility of cures for cataract of the La-mellar type. There are lesions and history sufficient, we feel, to give a favorable prognosis. However, the case is one which has been examined by some of the very best eye specialists in both the United States and Canada. The case, of course, always, operation; consequently they are somewhat dubious, especially as osteopathy is very new in this section of the country, as to our ability to do anything, and we asked to cite cures of any kind of cataract whatsoever which had been cured osteopathically, but, of course, they would prefer cures of this particular sort. The case is one of a boy nine years of age. As we are young practitioners, we are unable to furnish the information desired and thought perhaps you would be able to assist us through the columns of the Osteopathic Physician. These names will be listed along with the addresses of such cures will be of the most benefit to us. If the paper is resorted to we would prefer that the names of persons who come through you, as we do not care to come forward to publicity in this matter. Any replies sent us addressed "Cataract" will be appreciated and will be sent these practitioners.

Four Year Course at Still College.

Still College of Osteopathy has an announcement pertaining to its four-year course in its February issue of the Still College Journal of Osteopathy which will interest the profession and particularly those contemplating postgraduate work. The announcement is as follows:

"For the past two years Still College has offered an optional four-year course. In the future this offering will be given, but will be somewhat modified in order to meet the laws of some of the states. This course will be given only to those who have completed a course in a standard high school or who have similar or higher attainments. It will be now possible for those who have done work in high schools and colleges to matriculate under such regulations as will be in force in New York State, New York, which requires such qualifications. This course will be inaugurated with the coming September term. However, the term that precedes the present course of the college, covering a period of three years, which has been offered under regulations, in this regular course that has heretofore been prescribed will be in no way different from it as the regulations which are above outlined for the four-year course. One entering the col-

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meetings ever held. The subject under dis-
cussion was "The Liver," and the liveliest in-
terest was manifested throughout the meeting.
There was a constant and active audience, but not
more so than the free general discussion which
they called forth. The next meeting will be
held in April, at 8.30, and full at-
tendance is expected. The subject to be dis-
cussed will be the Stomach.—Martha Pettree,
D. O., Secretary.

Good Chance for a Field.

We call attention to a want ad in this issue from
Dr. Emilie L. Greene of Detroit, who
wants to find a successor to her lamented hus-
band’s practice at Jackson, Mich. At present
Dr. Greene is visiting Jackson certain days,
thus conducting both practices. She will sell
outright or on a commission basis, so that
the buyer. Dr. W. D. Greene was in practice at
Jackson eight years, had a splendid practice
and a host of friends.

Dr. Kinsinger’s Little Son Dies.

Dr. and Mrs. Joseph B. Kinsinger of Rush-
vile, Ind., sustained the loss of their eight-
year-old boy at Roswell, New Mexico, Janu-
ary 17, as a result of tubercular meningitis.
We extend our sympathy to the bereaved par-
ents. Dr. Kinsinger intended to leave Rush-
vile on account of the health of his child,
but his untimely death has determined the doctor
remain in his old field.

Fourth Illinois District.

The fourth district of the I. O. A. held its
quarterly meeting at the Illinois hotel, bloom-
ington, Saturday night, February 20. Dinner
was served at 6.30, after which Dr. McConnel-
of Chicago gave an excellent lecture on
"Osteopathic Teaching." Dr. Browne, president
of the I. O. A., was present and gave a talk on
legislation and the work of the associa-
tion. The next meeting will be in May. —Jno.
Bone, Secretary, Pontiac.

Dr. Lynch Not in Faculty.

We are informed by the Los Angeles Col-
lege of Osteopathy that Dr. Frank A. Ly¢
reported in a letter that he will be a
member of the faculty of that college
quoted by us to the same effect, is not
ideated with the teaching body of that insti-
tute. He was a student at the Los Angeles Coll
and had matriculated for his third year,
but had not persisted in it.

Oregonians Support the A. T. S. P. G. I.

In my report of the proceedings of the
Oregon meeting I neglected to state twen-
ty members pledged five dollars each
ward the Post Graduate College fund, as
initiative effort to be substantially incen-
tive next year; and also that ten dollars was vo-
to be applied toward the Dr. A. I. Still Gradu-
ate fund.—Mabel Abin, D. O., Sec’y, Florida.

Pierce County, Wash. Society.

We have organized a Pierce County Ost-
opathic Society with the following officers:
T. Thomas, president; R. H. Sladen,
vice-president; M. L. Moulton, secretary;
A. Goff, treasurer. We meet once a month
the different offices and discuss some sub-
bed by papers read by the members.—W.
Thomas, D. O., Tacoma, Wash.

Dr. Ashmore on the Pacific.

Dr. Edythe Ashmore is in Portland, Ore.
attending to business in connection with
the up her father’s estate. She will prob-
have left from here in three months;
home route will visit in San Francisco
Los Angeles, as usual.

Outline of the Natural System of
Responses to Irritation and Injury.

(Continued from page 7.)

were, a great number, and a great variety
the body. The pathology of these euny-
cannot at present be enlarged upon, ex-
splicatively; and cannot therefore
brutish wholly under the law of the uni-
etiology. The whole subject of the meta-
changes in the body is very largely a sub-
for future investigation. It will be discus-
to slightly better purpose in connection
the separate disease.
other general changes occur, but we h
referred to the most noticeable, those f
which all the well known diseases arise.
few others will be noted in connection
the diseases themselves. The few "unl
is, however, one that requires meri
Careful investigation.
In all these features—the physiological
response to irritation and injury, the cor
quences thereof, the accompanying gen-
changes, and other abnormalities—the unif
etiological principle seems to hold good;
very fact of abnormality, and the form of
depending upon the degree of irritation wi
acting upon the part diseased.

Our Opportunity

OSTEOPATHY cannot present
stronger or more appreciated mess
the world this spring than to
ience of the healing art. This is
some substantial assurance that there is
of la grippe, pneumonia and such
the permanent handicap of heart we
that they do not always go either
during or after these maladies. Cen
less thousands the past winter have suf
this spring many will experience the
la grippe and pneumonia, and their danger
after-effects. There is scarcely a home
which some one has not had the grippe.
THE OSTEOPATHIC PHYSICIAN

But more than that, the article should be disseminated vigorously now.

Osteopaths should bring this discussion to the attention of local newspapers, journals and magazines with which they are connected, with a request to review it extensively. The facts are so important, so new and so true on the subject of pneumonia's relation to weak hearts, that osteopaths are entitled upon this knowledge, to demand of any reporter who comments upon the benefit of osteopathy, if local practitioners will join the editor in furthering this educational propaganda.

From the table of contents you will see that in other respects this is a very fine issue. It is primarily a health talk to the business men of today, for the work of the osteopath and it will make a friend for osteopathy wherever one such reads it.

There is a good story by Dr. J. R. McDougal, pointing out the ill effects of patients demanding “long treatments.” There is a talk on the necessity of ventilation. Osteopathic care of the kidneys is emphasized. There is reference to a score of diseases which men ordinarily suffer from. Dr. J. R. McDougal, noting that the good wife, mother and daughter, too, will read this health talk relating to the handicaps of the breadwinner of the family with as much—if not even more-care, than men, themselves.

April is explained as the ideal time to begin the treatment of hay fever.

Dr. Carl P. McConney, in discussing this April issue, when given leave “to punch it to pieces as part of a whole, if he could,” returned the proofs without a single alteration, accompanied by this comment:

“Have you ever known Hay Fever to be of value to the health of the family?”

“Then give it up,” the editor says, “and let the truth be known. It is bound to raise the quotation on osteopathic stock wherever it circulates. Find a laywoman woman who will not read it when she has the chance and you'll have a freak—a real phenomenon. They'll all read it if you let regular contract users realize that probably three-fourths of our patients are women, and probably nine-tenths of our patients are sent to us by women? That will suggest how profitable it will be to you to suggest this February issue widely.

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